



CITY OF NOTTINGHAM.



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year 1945

CYRIL BANKS,

M.D., B.S.(LOND.), D.P.H.(SHEFF.),

MEDICAL OFFICER OF HEALTH.

Nottingham :

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HEALTH COMMITTEE MEMBERS

1945 (mid-year.)

LORD MAYOR :—COUNCILLOR FRANCIS CARNEY.

Chairman :—COUNCILLOR ERNEST PURSER.*

Vice-Chairman :—COUNCILLOR W. B. BLANDY,

M.R.C.S., L.R.C.P., L.D.S.

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„ E. A. BRADDOCK, J.P.	„ (Mrs.) S. JAMES.
„ W. CRANE, J.P.	„ J. LITTLEFAIR.
„ R. SHAW, J.P.	„ T. G. MILLER.
COUNCILLOR R. ARBON.	„ J. E. MITCHELL.
„ H. O. EMMONY.	„ A. E. SAVAGE.
„ (Miss) GLEN-BOTT,	„ W. SHARP.*
J.P., M.B., B.S., F.R.C.O.G.	

SUB-COMMITTEES

ISOLATION HOSPITAL AND CITY HOSPITAL.

CHAIRMAN.	COUNCILLOR EMMONY.
VICE-CHAIRMAN.	„ (Miss) GLEN-BOTT.
ALDERMAN BRADDOCK.	„ (Mrs.) HAZARD.
„ CRANE.	„ (Mrs.) JAMES.
„ SHAW.	„ MILLER.
COUNCILLOR ARBON.	„ MITCHELL.
The Chairman of this Sub-Committee is Alderman R. Shaw, and the Vice-Chairman, Councillor Emmony.	

TUBERCULOSIS AND VENEREAL DISEASES.

CHAIRMAN.	COUNCILLOR SHARP.
VICE-CHAIRMAN.	„ MILLER.
ALDERMAN CRANE.	„ MITCHELL.
COUNCILLOR (Miss) GLEN-BOTT.	„ SAVAGE.

MATERNITY AND CHILD WELFARE.

CHAIRMAN.	COUNCILLOR (Miss) GLEN-BOTT
VICE-CHAIRMAN.	„ (Mrs.) HAZARD.
ALDERMAN CRANE.	„ (Mrs.) JAMES.
COUNCILLOR ARBON.	„ SAVAGE.

Co-opted Members :

MISS W. GIBSON.	MRS. E. WEBBER.
MRS. M. MARSDEN.	MRS. L. SANSOM.

OFFENSIVE TRADES.

CHAIRMAN.	COUNCILLOR EMMONY.
VICE-CHAIRMAN.	„ SHARP.
ALDERMAN CRANE.	

BLIND PERSONS.

CHAIRMAN.	COUNCILLOR SHARP.
VICE-CHAIRMAN.	„ J. E. MITCHELL.

* *now Aldermen.*

HEALTH DEPARTMENT STAFF, 1945.

MEDICAL.

Medical Officer of Health—

CYRIL BANKS, M.D., B.S.(Lond.), D.P.H.(Sheff.).

Tuberculosis Officer and Deputy Medical Officer of Health—

JOHN V. WHITAKER, M.B., Ch.B., D.T.M., D.P.H.

Assistant Tuberculosis Officer—

FREDK. H. W. TOZER, M.D., B.S.(Lond.), M.R.C.P.(Lond.).

Director, Chest Radiography Unit—

A. E. BEYNON, M.R.C.S., L.R.C.P.

Senior Medical Officer, Maternity and Child Welfare—

ISABELLA MC D. HARKNESS, M.B., Ch.B., D.P.H.

Medical Staff, Maternity and Child Welfare—

HENRIETTA MARY MACLEOD, M.B., B.S.(Lond.).

ISABELLA M. O. ALLAN, M.A., M.B., Ch.B., D.P.H.

FREDA M. CHALKLEY, M.R.C.S., L.R.C.P.

BERNARD R. B. TRUMAN, B.A., M.B., Ch.B. (Part time).

ETHEL LANDON, M.B., Ch.B. (Part time).

MARJORIE A. SCOTT, M.R.C.S., L.R.C.P. (Part time).

Venereal Diseases—

R. MARINKOVITCH, M.D., Ch.B. (*Director*).

A. D. FRASER, M.D., D.P.H. (Part time).

ETHEL M. D. N. BAKER, M.D. (Part time).

DOROTHEA J. MANN, B.A., M.D. (Part time).

Bacteriologist—

ELLIOTT J. STORER, M.R.C.S., L.R.C.P.

Ultra Violet Ray Clinic—

R.A.C. RIGBY, L.R.C.P. & S. (Part time) Died Sept. 1945.

H. N. JAFFE, M.B., B.S. (Part time).

Skin Clinic—

A. D. FRASER, M.D., D.P.H. (Part time).

Diphtheria Immunization—

A. H. BOOTH, M.B., B.S., D.T.M. & H., D.O.M.S. (Part time).

Relief Districts—12 MEDICAL OFFICERS. (Part time).

Public Vaccinators—5 MEDICAL OFFICERS. (Part time).

NON-MEDICAL.

Chief Sanitary Inspector—

ALFRED WADE, F.R.San.I.

Deputy Chief Sanitary Inspector—

J. N. HUGHES, M.R.San.I.

Senior Inspector of Meat and other foods—

F. RICHARDSON, Cert. R.San.I.

Superintendent Health Visitor—

MISS M. BEATTY, S.R.N., S.C.M., H.V.

Assistant Supervisors of Midwives—

MISS S. M. HOWARD, S.R.N., S.C.M.

MISS D. BACKHOUSE, S.R.N., S.C.M., H.V., R.F.N.

Ophthalmic Nurse—

MISS W. E. HAYNES, S.R.N., S.C.M.

Chief Almoner—

MISS M. E. M. BENHAM, A.I.A.

Almoner—V.D. Clinic—

MISS P. MARSDEN, B.A., A.I.A.

Vaccination Officer—

C. H. COOPER.

Chief Clerk—

J. C. SLIGHT.

Sanitary Inspectors (all branches)—16.

Clerks (excluding Hospitals)—30.

Clerks (Casualty Bureau and Group Officer)—2.

Women Housing Officers—4.

Health Visitors, Tuberculosis Nurses—25.

Clinic Nurses, Orderlies, etc. (1 part time)—8.

City Midwives—30 and one relief midwife.

Almoners—4.

Hostels for Unmarried Mothers—6.

Ultra violet Ray Clinic—3.

Bacteriological Laboratory—5.

Skin Clinic—7.

Wartime Day Nurseries (as at 31/12/45)—
Matrons—8 ; Nurses—42 ; Others—17.

Mortuary Attendants—2.

Office Porter—1.

Cleaners—19.

General Labourer—1.

Venereal Diseases Hospital—5.

Small-pox Hospital (*Caretakers* : man and wife)—2.

Rat Control Staff—Labourers—3.

CITY ISOLATION HOSPITAL.

Assistant M.O.H. and Medical Superintendent—

ISRAEL M. LIBRACH, M.B., B.Ch., B.A.O., D.P.H.
(Taking the place of Dr. T. A. Don in the Forces).

Resident Medical Officer—ESTHER HAMMERMAN, M.D. (Vienna).

Matron—MISS F. A. BERKLEY, S.R.N., R.F.N., S.C.M.

Steward—F. W. DYKE (Taking the place of A. Slack in the Forces).

<i>Nursing Staff</i>	..	..	48
<i>Others—(Female)</i>	..	..	36
„ —(Male)	..	..	16
			<hr/> 100

NEWSTEAD SANATORIUM.

Medical Superintendent—

GEOFFREY O. A. BRIGGS, M.A., M.B., B.Ch., M.R.C.P.(Lond.),
D.P.H.

Resident Assistant Medical Officer—

GRACE M. WILD, M.B., B.Ch., B.A.O., T.D.D.

Matron—MISS H. I. RICHARDS, S.R.N., S.C.M., T.A.

Steward—C. ABBOTT.

<i>Nursing Staff</i>	..	..	49
<i>Others—(Female)</i>	..	..	38
„ —(Male)	..	..	16
			<hr/> 103

REPORT
OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1945.

To the Chairman and Members of the Health Committee.

I present the Annual Report on the Health of the City during the year 1945, and on the activities of all sections of the services provided by the Health Committee. The Report is given at greater length than during the war years, because the time has now come to give a better idea of the size and importance of the work than was possible during that period. Those who read such reports for the first time cannot fail to be struck by the vast number of subjects which are dealt with ; the fact is that the Health Committee deals with the life of the citizens in an amazing number of aspects.

A perusal of the Report shows what is done for the public in health and in disease. When the new medical services come into operation, the treatment of disease will largely become a responsibility of a central authority ; there will then be opportunities to devote our energies to doing more for people in health, in order to keep them healthy.

* * *

Statistics for the year showed a fall in the birth-rate to 19·7 against the previous year's high rate of 21·7, but it may be said that at the time of writing the year 1946 is likely to show a higher rate. Actually the fall in 1945 is not entirely due to fewer births but in small degree is

due to the fact that the Registrar-General has estimated a higher civilian population (on which the birth-rate is calculated). The population (mid-year 1945) is estimated at 265,090, an increase of 2,780. About one birth in seven is illegitimate. The death-rate at 12·9 is low, and the most satisfactory feature is that out of every 1,000 live births, only 53 died in the first year, which is a record for Nottingham, and an encouraging thing for all those who have taken part in the struggle to save infant lives.

* * *

There is little need for comment on the reports submitted by the heads of the various sections of the Health Department. They are printed as received, subject to a little editing and pruning where some of the statistical tables would otherwise have been too large for publication. They give evidence of fine work carried out, and thanks must be expressed to the writers for the time given up in off-duty hours for the preparation of these reports.

* * *

Although the death of Dr. C. L. Crawford Crowe did not take place during the year to which this Report refers, I desire to record it here.

Dr. Crowe passed away suddenly on the 22nd April, 1946. He had been Medical Superintendent of the City Hospital since 1st February 1938, and his active mind was constantly engaged on the improvements in management, on the schemes for development, and on the building extensions which he considered necessary and desirable.

Faced with the task of converting the hospital into a Category A1. Emergency Medical Service Hospital to

meet war-time needs for civilians and Forces personnel, he brought into action his wide knowledge of hospital problems, with energy and enthusiasm, and one never had any anxiety about the ability of the organization he created to meet all the strains and stresses which were likely to be imposed upon it. In fact, the hospital, under his direction, came through its heavy war service with credit. He lived for his hospital, and many people have cause to rejoice that he lived and worked for them ; it is a heavy blow of fate that he was not able to remain to guide the destinies of the hospital through the important period of development which lies ahead.

Dr. Crowe's vivid personality will long remain impressed upon the minds of his colleagues in the health services of the city. He would wish no higher praise than is contained in the three words : " He worked hard."

* * *

Reference must be made to the death of a long and highly-esteemed colleague, Dr. R. A. Clayton Rigby, who was on the visiting staff of the City Hospital as Radiologist, and who also was one of the medical officers of the Ultra-violet Ray Clinic. His long association with the Health Committee's work should be remembered with pleasure. He was a very likeable man and an expert in his chosen branch of the profession.

* * *

The retirement of Dr. J. Wilkie Scott from his position as Visiting Physician to the City Hospital, and of his wife from her duties of part-time medical officer in the maternity and child welfare clinics, did not occur until 1946, but can appropriately be referred to here.

Dr. Wilkie Scott himself was also in the early days of such work one of our pioneer Infant Welfare staff. The double loss to the city, resulting from the retirements of two such able and acceptable colleagues, has already been uncomfortably felt. The good wishes of the staff and the gratitude of very many patients follow them.

Similarly, one records the retirement of Miss Hay who for a long period of years was Matron of the Bulwell Hall Sanatorium for Children until it closed in 1938. That institution, housed in aged though beautiful premises, was a difficult one to manage, but Miss Hay was entirely successful. Latterly she worked in the Tuberculosis Clinic.

GENERAL STATISTICS FOR 1945.

POPULATION.

The Registrar-General's Estimate of the civilian population of the City at the middle of 1945 is ..					265,090
AREA (acres) ..	..	..	..	..	16,166
Rateable Value ..	..	..	..	..	£2,192,223
Sum represented by a penny rate (1945-46) ..	..	..	..	..	£8,780
Rates in the £ (1945-46) ..	..	..	..	..	17/-

BIRTHS.

Legitimate	Males	2,325	Females	2,163	..	Total	4,488
Illegitimate	„	378	„	368	..	„	746
Total Births		..	..	..	..	..	5,234
Birth-rate per 1,000 of population		..	..	..	..	..	19.7
Average 10 years 1891—1900		..	..	..	..	..	29.20
„ „ 1901—1910		..	..	..	..	..	26.90
„ „ 1911—1920		..	..	..	..	..	21.03
„ „ 1921—1930		..	..	..	..	..	18.97
„ „ 1931—1940		..	..	..	..	..	15.96
1941	..	..	..	..	..	..	16.04
1942	..	..	..	..	..	..	18.15
1943	..	..	..	..	..	..	19.11
1944	..	..	..	..	..	..	21.7
1945	..	..	..	..	..	..	19.7

STILLBIRTHS.

Legitimate	Males	52	Females	52	..	Total	104
Illegitimate	„	8	„	13	..	..	21
Total stillbirths		..	..	..	..	..	125
Rate per 1,000 births (live and still)		..	..	..	..	..	23.9

DEATHS.

Males 1,744	Females 1,680	..	Total 3,424
Death-rate per 1,000 of population		..	12·9
Average 10 years 1891—1900	..	..	18·38
„ „ 1901—1910	..	..	16·50
„ „ 1911—1920	..	..	15·55
„ „ 1921—1930	..	..	13·24
„ „ 1931—1940	..	..	13·32
1941 ..	..	..	14·03
1942 ..	..	..	13·07
1943 ..	..	..	14·30
1944 ..	..	..	13·31
1945 ..	..	..	12·9

DEATHS FROM PUERPERAL CAUSES.

		Rate per 1,000 (live and still) births.		
		No.	NOTTINGHAM.	ENGLAND & WALES.
Sepsis ..	..	3	·57	·24
Other Causes ..	..	4	·76	1·22
Total ..	..	7	1·33	1·46

The maternal death-rate per 1,000 births (live and still) during the last ten years is given in the following table :—

	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945
Fever.. ..	5	4	2	2	3	2	3	5	2	3
Other causes ..	15	9	6	4	9	10	9	2	3	4
Per 1,000 births	4·5	2·8	1·8	1·3	2·7	2·8	2·5	1·38	·85	1·33

DEATHS FROM MEASLES (all ages) ..	7
„ „ WHOOPING COUGH (all ages) ..	4
„ „ DIARRHŒA (under 2 years of age)	35

INFANT MORTALITY.

Deaths of Infants under 1 year ..	279
Rate per 1,000 live births ..	53
(Legitimate 50 ; Illegitimate 73).	
Average 10 years 1891—1900 ..	182
„ „ 1901—1910 ..	161
„ „ 1911—1920 ..	125
„ „ 1921—1930 ..	89
„ „ 1931—1940 ..	76
1941 ..	80
1942 ..	62
1943 ..	65
1944 ..	56
1945 ..	53

See also page 37.

Birth-rates, Death-rates, Analysis of Mortality, and Case-rates for certain Infectious Diseases
in the year 1945.

(England and Wales, London, 126 Great Towns and 148 Smaller Towns).
(Provisional Figures based on Weekly and Quarterly Returns).

	England and Wales.	126 County Boro's. and Great Towns including London.	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census).	London Administrative County.	Nottingham.
Rates per 1,000 Population.					
BIRTHS :—					
Live	16·1	19·1	19·2	15·7	19·7
Still	0·46	0·58	0·53	0·40	0·47
DEATHS :—					
All Causes	11·4	13·5	12·3	13·8	12·9
Typhoid and Paratyphoid fevers	0·00	0·00	0·00	0·00	0·00
Smallpox	—	—	—	—	—
Measles	0·02	0·02	0·02	0·01	0·03
Scarlet fever	0·00	0·00	0·00	0·00	0·01
Whooping Cough	0·02	0·02	0·01	0·02	0·01
Diphtheria	0·02	0·02	0·02	0·01	0·03
Influenza	0·08	0·07	0·07	0·07	0·03
NOTIFICATIONS :—					
Smallpox	0·00	0·00	—	0·00	—
Scarlet fever	1·89	2·02	2·03	1·57	3·75
Diphtheria	0·46	0·52	0·56	0·31	0·75
Enteric fever	0·01	0·01	0·01	0·01	0·01
Erysipelas	0·25	0·28	0·24	0·31	0·27
Pneumonia	0·87	1·03	0·72	0·78	0·96
Measles	11·67	10·89	11·19	9·03	6·77
Whooping Cough	1·64	1·65	1·47	1·25	1·05
Rates per 1,000 Live Births.					
Deaths under 1 year of age	46	54	43	53	53
Deaths from Diarrhoea and Enteritis under 2 years of age	5·6	7·8	4·5	7·6	6·6

Birth-rate, General Death-rate, and Death-rates from the Principal Epidemic and from Tuberculous Diseases, per 1,000 of Population, and Infantile Death-rate per 1,000 Births.

NOTTINGHAM.

In Five Yearly Periods, 1856-1930, and in Single Subsequent Years.

	Birth-rate per 1,000 living.	Death-rate per 1,000 living.	Infantile Death-rate.	Death-rate per 1,000 living from								
				7 principal Epidemic Diseases.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	"Fever" principally Enteric.	Diarrhoea.	Phthisis other Tuber- culous Diseases
1856-1860	36·8	27·2	209	5·98	0·21	0·80	1·08	0·13	0·76	1·02	2·00	3·22
1861-1865	34·8	24·9	192	3·83	0·09	0·43	0·98	0·12	0·51	0·78	1·09	3·19
1866-1870	31·3	23·8	200	4·34	0·07	0·44	0·73	0·09	0·51	0·92	1·57	2·78
1871-1875	34·1	24·9	192	4·30	0·79	0·31	0·53	0·02	0·26	0·84	1·53	2·42
1876-1880	34·6	21·7	175	3·00	0·00	0·35	0·62	0·03	0·43	0·34	1·06	1·85
1881-1885	36·6	20·9	174	3·22	0·06	0·41	0·77	0·12	0·46	0·31	1·09	1·99
1886-1890	30·4	17·9	168	2·39	0·01	0·42	0·11	0·06	0·45	0·31	1·04	1·52
1891-1895	29·5	18·3	174	2·50	0·01	0·35	0·23	0·08	0·41	0·26	1·12	1·76
1896-1900	28·9	18·5	191	2·66	..	0·46	0·10	0·10	0·36	0·32	1·22	1·86
1901-1905	27·7	17·2	170	2·22	0·01	0·38	0·09	0·19	0·31	0·20	1·01	1·74
1906-1910	26·1	15·8	152	1·64	0·00	0·33	0·05	0·13	0·27	0·11	0·75	1·70
1911-1915	22·9	15·1	137	1·61	..	0·36	0·06	0·11	0·21	0·05	0·83	1·57
1916-1920	19·1	16·0	113	1·02	..	0·25	0·02	0·19	0·17	0·01	0·37	1·62
1921-1925	20·4	12·9	90	0·65	..	0·16	0·02	0·06	0·13	0·01	0·26	1·17
1926-1930	17·5	13·6	88	0·68	..	0·05	0·02	0·20	0·11	0·00	0·30	1·14
1931	17·2	13·6	82	0·45	..	0·15	..	0·02	0·04	0·01	0·23	1·12
1932	16·4	12·5	80	0·35	..	0·02	..	0·03	0·12	..	0·18	0·97
1933	15·8	13·4	85	0·51	..	0·18	0·01	0·02	0·04	0·01	0·25	1·04
1934	15·6	12·3	69	0·33	..	0·06	0·02	0·02	0·07	0·00	0·15	0·89
1935	15·7	12·5	81	0·38	..	0·07	0·02	0·05	0·02	0·00	0·22	0·98
1936	15·2	13·2	89	0·46	..	0·08	0·02	0·09	0·09	0·00	0·18	0·93
1937	16·0	13·4	80	0·39	..	0·08	0·00	0·03	0·03	0·01	0·24	0·99
1938	15·6	12·7	71	0·22	..	0·03	0·01	0·01	0·04	..	0·13	0·83
1939	15·8	13·3	66	0·23	..	..	0·01	0·01	0·01	0·01	0·19	0·87
1940	16·5	15·5	61	0·17	..	0·02	0·00	0·04	0·02	..	0·09	1·03
1941	16·0	14·0	80	0·49	..	0·02	..	0·05	0·07	0·00	0·35	1·09
1942	18·2	13·1	62	0·32	..	0·05	0·00	0·04	0·05	0·00	0·18	0·89
1943	19·1	14·3	65	0·21	..	0·02	..	0·02	0·04	..	0·13	0·97
1944	21·7	13·3	56	0·38	..	0·01	0·01	0·01	0·04	..	0·31	0·84
1945	19·7	12·9	53	0·11	..	0·03	0·01	0·03	0·01	..	0·13	0·77

Summary of Deaths at all ages from various causes, 1945.
(R.G.'s International Short List).

						1945
TOTAL DEATHS						3,424
Deaths under 1 year	..	..	..	..	..	279
„ 1—5 years..	..	..	..	..	..	50
„ 5—45 „ ..	..	..	..	..	..	386
„ 45—65 „ ..	..	..	..	..	..	849
„ 65 and over ..	..	..	..	..	..	1,860
CAUSES OF DEATHS :—						
Typhoid and Paratyphoid Fevers	..	..	..	..	..	—
Measles .. .. .	..	..	..	..	..	7
Scarlet Fever .. .. .	..	..	..	..	..	2
Whooping-Cough .. .. .	..	..	..	..	..	4
Diphtheria .. .. .	..	..	..	..	..	8
Influenza .. .. .	..	..	..	..	..	10
Encephalitis Lethargica .. .. .	..	..	..	..	..	5
Cerebro-Spinal Fever .. .. .	..	..	..	..	..	3
Tuberculosis of Respiratory System .. .. .	..	..	..	..	..	179
Other tuberculous diseases .. .. .	..	..	..	..	..	28
Syphilis .. .. .	..	..	..	..	..	17
Ac-Polio-Myelitis and Polioencephalitis .. .. .	..	..	..	..	..	1
Cancer, malignant disease .. .. .	..	..	..	..	..	509
Diabetes .. .. .	..	..	..	..	..	23
Cerebral Hæmorrhage, etc. .. .. .	..	..	..	..	..	316
Heart Disease .. .. .	..	..	..	..	..	907
Other circulatory diseases .. .. .	..	..	..	..	..	117
Bronchitis .. .. .	..	..	..	..	..	283
Pneumonia (all forms) .. .. .	..	..	..	..	..	186
Other respiratory diseases .. .. .	..	..	..	..	..	40
Peptic Ulcer .. .. .	..	..	..	..	..	43
Diarrhœa, etc. .. .. .	..	..	..	..	..	35
Appendicitis .. .. .	..	..	..	..	..	10
Other digestive diseases .. .. .	..	..	..	..	..	81
Acute and chronic Nephritis .. .. .	..	..	..	..	..	74
Puerperal Sepsis .. .. .	..	..	..	..	..	3
Premature Birth .. .. .	..	..	..	..	..	57
Other puerperal cases .. .. .	..	..	..	..	..	4
Congenital debility, malformations, etc. .. .. .	..	..	..	..	..	77
Suicide .. .. .	..	..	..	..	..	20
Other violence .. .. .	..	..	..	..	..	96
Other defined diseases .. .. .	..	..	..	..	..	279

INFANT MORTALITY during the year 1945.
Deaths from stated causes at various ages under One Year.

CAUSE OF DEATH.	Under 1 Week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	TOTAL UNDER 1 MONTH.	1—3 Months.	3—6 Months.	6—9 Months.	9—12 Months.	TOTAL DEATHS UNDER ONE YEAR.
CERTIFIED	106	7	3	6	122	50	45	30	25	272
UNCERTIFIED	7	—	—	—	7	—	—	—	—	7
Small-pox	—	—	—	—	—	—	—	—	—	—
Chicken-pox	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	1	2	—	3
Scarlet Fever	—	—	—	—	—	—	—	—	—	—
Whooping-Cough	—	—	—	—	—	—	—	—	2	2
Diphtheria and Croup	—	—	—	—	—	—	—	—	—	—
Influenza	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	—	—	—	—	—	—	1	1	1	3
Tuberculous Meningitis	—	—	—	—	—	—	1	—	—	1
Abdominal Tuberculosis	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	—	—	—	—	—	—	—	—	—	—
Meningitis (<i>not Tuberculous</i>)	1	—	—	—	1	—	2	2	2	7
Convulsions	1	—	—	1	2	1	1	1	1	6
Laryngitis	—	—	—	—	—	—	—	—	—	—
Bronchitis	—	—	—	1	1	6	4	4	3	18
Pneumonia (all forms)	9	2	2	2	15	17	22	8	11	73
Diarrhoea & Enteritis	—	1	—	—	1	14	10	6	4	35
Gastritis	—	—	—	—	—	—	—	—	—	—
Syphilis	—	—	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—	—	—
Suffocation (overlying)	—	—	—	—	—	—	1	3	—	4
Difficulty or Injury at Birth	8	—	—	—	8	—	—	—	—	8
Atelectasis	10	—	—	—	10	1	—	—	—	11
Premature Birth	57	—	—	—	57	—	—	—	—	57
Congenital Malformations	13	2	1	—	16	2	1	1	—	20
Atrophy, Debility and Marasmus	3	—	—	1	4	3	—	1	—	8
Other Causes	11	2	—	1	14	4	1	1	3	23
TOTALS.. ..	113	7	3	6	129	48	45	30	27	279

In 1945 there were 509 deaths from cancer in its various forms.

CANCER.

NOTTINGHAM DEATHS, 1945
(International Classification).

SHOWING AGE-PERIOD AT DEATH.

		0—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	Total
Buccal cavity and	m.	—	—	—	—	—	—	2	3	4	11	6	26
Pharynx	f.	—	—	—	—	—	—	—	3	3	6	1	13
Digestive Organs	m.	—	—	—	—	—	1	7	10	33	45	23	119
and Peritoneum	f.	—	—	—	—	—	2	3	15	32	28	28	108
Respiratory	m.	—	—	—	—	—	1	3	11	17	17	2	51
Organs	f.	—	—	—	—	—	—	3	3	6	3	4	19
Uterus	f.	—	—	—	—	—	2	3	6	10	6	6	33
Other Female													
Genital Organs	f.	—	—	—	—	—	—	2	6	6	3	4	21
Breast	f.	—	—	—	—	—	1	8	11	16	13	14	63
Male Genito-urinary													
Organs	m.	—	—	—	—	—	—	1	—	4	8	7	20
Skin	m.	—	—	—	—	—	—	—	—	1	—	2	3
	f.	—	—	—	—	—	—	—	—	—	—	2	2
Other or Unspecified	m.	—	—	—	—	—	—	—	3	5	8	3	19
Organs	f.	—	—	—	—	—	—	1	1	3	4	3	12

**SANITARY CIRCUMSTANCES OF THE CITY,
HOUSING AND
INSPECTION AND SUPERVISION OF FOOD.**

Report by Mr. Alfred Wade, Chief Sanitary Inspector

Sanitary Inspection of the Area.

For the purposes of general sanitary and housing inspections, the City is divided into eight areas, each of which is supervised by a qualified sanitary inspector. During 1945, notices respecting 14,298 nuisances or defects were served ; the figure for 1944 was 11,247 and in the years immediately before the war, the annual figure was approximately 5,000. It will also be observed from the statistical tables which follow that the number of notices outstanding reached the record figure of 6,299 at the end of the year, although the Department executed work in default of owners following non-compliance with the Health Committee's requirements in 1,779 cases. It became increasingly difficult during the year to secure the carrying out of building repair work owing to the shortage of labour and materials. Moreover, the scheme for the licensing of building work was amended so that repairs costing more than ten pounds could not be undertaken without a licence. The delay thus occasioned caused hardship to the occupiers of many working-class houses.

(i) Number of Inspections.

The number of the inspections made by the District Sanitary Inspectors during the year was :—

First Visits	..	..	..	22,003
Re-visits	..	..	..	24,166
				<hr/>
Total number of inspections	..			46,169
				<hr/>

(ii) Number of Notices Served and Complied with.

Notices in respect of premises :—	District No. 1	District No. 2	District No. 3	District No. 4	District No. 5	District No. 6	District No. 7	District No. 8	Totals
OUTSTANDING (1st January 1945) ..	382	430	516	737	550	510	667	631	4,423
Served ..	1,168	2,204	1,222	2,507	1,904	1,974	1,758	1,561	14,298
Complied with ..	1,120	1,805	1,192	2,032	1,771	1,633	1,522	1,347	12,422
OUTSTANDING (1st Jan. 1946) ..	430	829	546	1,212	683	851	903	845	6,299

(iii) Details of Notices Served and Complied with.

	Served.	Complied with.
Housing Act, 1936, Section 9	4,057	3,802
Public Health Acts	10,241	8,620
Defective houses	4,724	4,403
Housing Repairs—Roofs	2,135	1,996
Walls	2,159	1,330
Floors and ceilings	928	742
Windows	1,456	1,102
Fireplaces	1,017	877
Coppers	404	334
Sinks, provision	36	25
Sinks, repair	375	313
Internal water supply, provided	6	10
Water supply repair	341	295
Rainwater conductors	1,101	1,129
Others	1,196	1,039
Houses, cleansing of	111	99
Houses, disinfestation of	245	248
Overcrowding	8	9
Licensed premises, cleansing or improvement of	5	3
Drains, cleansing of	473	452
Drains, repair of	277	257
Panterpits, abolition of	7	12
Additional W.C.'s provision of	3	3
W.C.'s clearance of	177	177

				Served.	Complied with.
W.C.'s repair of	..	..	..	2,251	2,165
Closets, cleansing of	..	..	..	24	34
Courts and yards, paving of	..	..	..	—	1
Cleansing of	..	..	..	32	32
Repair of	..	..	..	279	231
Nuisance from pigs	..	..	..	1	2
fowls	..	..	..	35	36
other animals	..	..	..	14	16
offensive trades	..	..	..	—	—
food premises	..	..	..	1	—
Manure pits, repair of	..	..	..	2	1
abolition of	..	..	..	1	—
Offensive accumulations, removal of	..	..	..	71	72
Rat and mice nuisances, abatement of	..	..	..	1,099	887
Dust bins, provision of	..	..	..	5,397	4,103
Miscellaneous	..	..	..	300	261
Tents, vans and sheds	..	..	..	1	—
Houses-let-in-lodgings	..	..	..	6	7
Common lodging houses	..	..	..	—	—
Factories and workplaces	..	..	..	50	57

Water

The water supply of the City has been satisfactory in quality and in quantity. Piped supplies are available to almost the whole of the area and there are few houses situated within the City boundaries which are not provided with water from the public mains.

Close co-operation exists between the Water Department and the Health Department to safeguard the purity of the Municipal water supply. The City Water Engineer arranges for the frequent examination by the City Analyst of samples of raw and treated water from all sources. Both bacteriological examinations and chemical analyses are made and the results are communicated to the Medical Officer of Health. Occasional check samples are procured by sanitary inspectors from consumers' premises.

From time to time discussions have taken place between the City Water Engineer, Medical Officer of Health, Chief Sanitary Inspector and the public health officers of the County Council and County District Councils whenever circumstances have arisen likely to give rise to the contamination of the water supply at the source.

(iv) Statutory Action.

Notices under the Public Health Act, 1936.

			Served.	Complied with.
Section 92 (a) Houses	..	..	50	31
(b) Others	..	..	11	12
Section 75 (dustbins)	..	..	2,384	2,079
Section 39 (drains)	..	..	236	181
Section 44 (inadequate closet accommodation)			1	2
Section 45 (closets)	..	..	2	—
Section 46 (sanitary conveniences in workplaces)	..	..	—	1
Section 56 (paving)	..	..	101	96
Section 83 (cleansing of filthy or verminous premises)	..	..	7	5
Section 287 (notice of entry)		..	34	34

*Notices under the Nottingham Corporation Act,
1923.*

Section 73 repair of water-closets	..	283	206
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*Notices under the Nottingham Corporation Act,
1935.*

Section 19 cleansing and repair of drains water-closets and soil-pipes	..	1,457	1,270
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Notices under the Housing Act, 1936.

Section 9	1,675	1,164
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Work done by Corporation in default—1,779.

Factories.

(a) *Factories with Mechanical Power*—In 26 instances defects or contraventions remediable under the Public Health or Factories Acts were reported by H.M. Inspector

of Factories in accordance with the provisions of Section 9 of the Factories Act, 1937 and in each case suitable action was taken.

(b) *Factories without Mechanical Power*—The number of factories without mechanical power on the register is now 486.

(c) *Outwork*—Lists of outworkers forwarded to the Health Department during the months of February and August in accordance with the provisions of the Factories Act, showed that 1,231 outworkers were employed. The principal trades employing home-workers were the making altering and finishing of wearing apparel, the making, ornamenting, mending and finishing of lace and nets and the making of paper bags.

The standard of cleanliness of the houses and premises where outwork has been carried on was generally good ; in only six cases was it necessary to issue warnings in respect of unwholesome conditions.

Houses-Let-In-Lodgings.

Owing to the housing shortage, there has been a large increase in the number of houses-let-in-lodgings or occupied by two or more families. There are now 159 such houses on the register, but this does not indicate the true position because there is no necessity on the part of the occupiers to register the premises until required to do so by the Local Authority. Consequently, many such houses are established without the knowledge of the Health Department.

The bye-law regarding the cleansing and decoration of such premises during the month of April was enforced where necessary.

Measures to combat Infestation by Rats, Mice, Insect Pests, etc.

In order to assist occupiers of dwelling-houses to deal effectively with the destruction of rats, mice, bed-bugs etc. the Health Committee now provide free of charge the services of trained operators. Modern methods of baiting, poisoning and gassing have proved very effective in the destruction of rats and mice. For the disinfection of verminous houses, contact insecticides have been used with good effect. In all cases of infestation, whether by rats, mice, bed-bugs or otherwise, the occupiers of affected premises and the general public must assist by ensuring that conditions likely to encourage the harbouring and the multiplication of such pests do not arise.

It is estimated that at least 11,571 rats and 8,720 mice were destroyed by the Department during the year. These figures do not include rats destroyed by the City Engineer's Department in sewers and on the embankments of the River Leen where large numbers of rats are known to have been accounted for.

Smoke Abatement.

The position regarding atmospheric pollution deteriorated during the war years when industrial undertakings were asked to increase emissions of smoke as a defence measure. The time has now arrived when energetic action should again be taken to deal with industrial smoke. Owing to neglect during the war, however, many smoke producing plants now require renewal or overhaul and owners in many cases cannot readily obtain new apparatus or parts. The poor quality of fuel available to many undertakings is another cause of excessive smoke.

Canal Boats.

The Canals, and other navigable waters within the City have been visited on 21 occasions during the Year and 41 boats were inspected. Frequent visits were made at various times during the hours laid down by the Act, and the Inspector has at all times been allowed free access to the cabins of the boats inspected.

The number of women carried on the boats inspected was 21, the number of children under 5 years of age was 13 and the number of children between 5 and 12 years of age was 15.

Six notices were issued against owners of boats in connection with the following twelve infringements of the Act and Regulations :—

Boats not properly marked	..	..	..	3
Cabins in need of repair or painting	..	..	..	6
Failure to produce Registration Certificate	..	..	..	2
Cabins overcrowded	..	..	..	1

It was not necessary in any case to resort to legal proceedings.

No case of infectious disease on a canal boat was reported during the year, nor was it necessary to detain any boat for cleansing or disinfection.

There were no new boats registered during the year.

The total number of boats now in use and registered by this Authority is 41.

The Education Authority were notified with regard to seven children of school age who were living on canal boats and who were visiting the City for a period longer than two days.

Woman Housing Officers.

Four women officers appointed by the Housing Committee and working under the Chief Sanitary Inspector on the Corporation's Housing Estates made 8,806 visits during the year. They advise and assist the tenants to make the best use of the houses and when necessary, deal with verminous and insanitary conditions. Three of the women officers are trained nurses and one acts as a resident district nurse on the Bestwood Estate.

Milk Supply.

The number of cow-keepers on the register at the end of the year was twenty-one and the average number of cows housed within the City was 470. The number of milk purveyors was 209. The conditions under which milk was produced, stored, treated and distributed were regularly inspected to ensure that the statutory requirements applicable to the trade were complied with.

Tuberculin-tested milk.

57 samples were procured and 40 complied with prescribed standards. 17 were unsatisfactory and appropriate action was taken.

Accredited Milk.

40 samples were taken, 36 of which proved satisfactory.

Pasteurised Milk.

79 samples of milk sold under licence were obtained of which 77 were satisfactory. To test the efficiency of pasteurisation, 355 samples were subjected to the phosphatase test and 353 were proved to have been correctly heat-treated.

Heat-treated Milk.

Although the heat treatment of milk is not legally compulsory, the Ministry of Food introduced a scheme during the year under which milk dealers, subject to certain conditions, received additional allowances in respect of milk treated by heat in plants and premises authorised by the Ministry. As from the 1st March, 1945, at the request of the Ministry the Department procured 312 samples which were subjected to the Phosphatase Test and 66 samples to which the Methylene Blue Test was applied. Of the former, only 12 and of the latter 9 failed to satisfy the tests.

Ungraded Milk.

70 samples were taken and submitted for examination for bacterial count and B. Coli test. 58 gave satisfactory bacterial results.

Examination of Milk for Tubercle Bacilli.

59 samples of raw milk were examined and 6 or 10·17 per cent gave positive results on biological testing. These cases were referred to the Ministry of Agriculture (Animal Health Division) for investigation.

The percentage of positive results shown in previous years was :—

1941 .. 11·4% 1942 .. 8·3% 1943 .. 6·9% 1944 .. 4·4%

16 samples of pasteurised milk were also examined for tubercle bacilli and 2 gave positive results.

Meat.

Slaughtering was again centralised by the Ministry of Food and only two slaughter-houses were in regular use, namely the Public Slaughter-house and the Egerton Street

Slaughter-house of the Co-operative Society. The Cinderhill Co-operative Society's Slaughter-house at Old Basford was used occasionally for the slaughter of a small number of pigs.

The number of animals slaughtered and inspected in the City during the year were :—

Bulls	429
Bullocks	8,888
Cows	7,564
Heifers	4,454
Calves	24,438
Sheep	34,574
Pigs	4,927
Goats	2
	<hr/>
	85,276
	<hr/>

The City slaughtering scheme provided meat not only for the City area but also for a very large population outside the City and consequently, many County District Councils were relieved of their responsibilities in connection with the supervision of slaughtering and the inspection of meat. The City inspection staff, however, worked under considerable pressure during times of heavy killing.

Legal proceedings were instituted against a café proprietor in respect of the sale of horseflesh for human consumption and he was fined £46 and £2. 2s. 0d. costs. In another case where the occupier of a café failed to keep clean the floor and allowed filth to accumulate in the food preparing room, the magistrates imposed a fine of £2. 0s. 0.

The following is a summary of meat confiscated by the Department during the year as being diseased, unsound, unwholesome or unfit for human consumption :—

HOME KILLED MEAT:

Beef	..	..	..	36,954	stones	8	lbs.
Mutton and Lamb	..	..	..	539	„	12	„
Pork	..	..	..	1,204	„	3	„
Veal	..	..	..	262	„	8	„
Offal	..	..	..	28,974	„	5	„
				67,935	„	8	„

IMPORTED MEAT :

Beef	..	..	..	97	„	9	„
Pork	..	..	..	18	„	4	„
Offal	..	..	..	32	„	2	„
				148	„	1	„

Grand Total .. 425 tons 10 cwts. 3 stones 9 lbs.

Number of animals killed and of carcasses inspected and number confiscated either wholly or in part on account of disease.

	Bulls.	Bull'ks.	Heifers.	Cows.	Calves.	Total.	Sheep and Lambs.	Goats.	Pigs.	Total.
Number of Carcasses inspected										
(a) Public Slaughter house ..	429	8,080	4,283	7,313	24,438	44,543	33,552	2	4,897	82,994
(b) Private Slaughter houses	—	808	171	251	—	1,230	1,022	—	30	2,282
Number of Animals killed and Number of Carcasses inspected	429	8,888	4,454	7,564	24,438	45,773	34,574	2	4,927	85,276
<i>All Diseases except Tuberculosis.</i>										
Whole Carcasses affected ..	3	7	6	30	88	134	144	—	41	319
Carcasses in which some part or organ was affected ..	32	2,224	598	3,957	18	6,829	468	—	244	7,541
Percentage of number in- spected affected with dis- ease other than tuberculosis	8.1	25.1	13.5	52.7	.43	15.2	1.7	—	5.7	9.2
<i>Tuberculosis only.</i>										
Whole carcasses affected ..	5	19	49	745	13	831	—	—	16	847
Carcasses in which some part or organ was affected ..	175	1,263	638	3,427	1	5,504	—	—	584	6,088
Percentage of number in- spected affected with Tuberculosis ..	41.9	14.4	15.4	55.1	.05	13.8	—	—	12.1	8.1

Shell Fish.

Shell fish from layings in various parts of Great Britain and Ireland were received into the Wholesale Fish Market. The consignments were carefully supervised and at regular intervals samples obtained for bacteriological examination. All samples taken during the year were found to be satisfactory.

Other Foods.

The total weight of foodstuffs, other than meat, confiscated on account of disease or unsoundness was 120 tons 11 cwts. 7 stones 10 lbs.

Food Adulteration.

During the year the following samples were obtained :—

Formal	..	..	414	Analysed by Public Analyst.
Informal	..	..	776	„ „ „ „
Informal milk	..	..	158	Tested by Inspectors
Total			1,348	

The following table shows the nature of the samples taken, together with the results of the Public Analyst's examination :—

Article	No. of Samples			No. Genuine			No. Adulterated		
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
Milk	232	668	900	197	664	861	35	4	39
Butter	30	37	67	30	37	67	—	—	—
Margarine	22	20	42	22	20	42	—	—	—
Lard	8	21	29	8	21	29	—	—	—
Cheese	9	11	20	9	11	20	—	—	—
Coffee	9	—	9	9	—	9	—	—	—
Cocoa	7	—	7	7	—	7	—	—	—
Coffee and Chicory ..	3	—	3	3	—	3	—	—	—
Sponge Powder ..	1	—	1	1	—	1	—	—	—
Cake Mixture ..	11	—	11	11	—	11	—	—	—
Bicarbonate of Soda	3	—	3	3	—	3	—	—	—
Compound Mustard	5	—	5	5	—	5	—	—	—
Pearl Barley ..	4	—	4	4	—	4	—	—	—
Ground Ginger ..	1	—	1	1	—	1	—	—	—
Semolina	8	—	8	8	—	8	—	—	—
Potted Meat Paste ..	4	—	4	4	—	4	—	—	—
Carried forward ..	357	757	1114	322	753	1075	35	4	39

Article	No. of Samples			No. Genuine			No. Adulterated		
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
Brought forward ..	357	757	1114	322	753	1075	35	4	39
Arrowroot	3	—	3	3	—	3	—	—	—
Pepper	2	—	2	2	—	2	—	—	—
Baking Powder ..	6	1	7	6	1	7	—	—	—
Pudding Mixture ..	7	—	7	7	—	7	—	—	—
Compound Liquorice Powder	1	—	1	1	—	1	—	—	—
Curry Powder ..	3	—	3	3	—	3	—	—	—
Chocolate Cup ..	2	—	2	2	—	2	—	—	—
Powdered Gelatine ..	2	—	2	2	—	2	—	—	—
Epsom Salts ..	4	1	5	4	1	5	—	—	—
Condensed F.C. Milk..	1	—	1	1	—	1	—	—	—
Dried Fruit ..	3	—	3	3	—	3	—	—	—
Golden Raising Powder	2	—	2	2	—	2	—	—	—
Ground Nutmeg ..	1	—	1	1	—	1	—	—	—
Egg Substitute ..	1	—	1	1	—	1	—	—	—
Aspirin Tablets ..	1	—	1	1	—	1	—	—	—
Soya Flour ..	1	—	1	1	—	1	—	—	—
Golden Syrup ..	1	—	1	1	—	1	—	—	—
Piccalilli	1	—	1	1	—	1	—	—	—
Malted Oatmeal ..	1	—	1	1	—	1	—	—	—
Gravy Salt	1	—	1	1	—	1	—	—	—
Peppermint Cordial ..	1	—	1	1	—	1	—	—	—
Orange Squash ..	1	1	2	1	1	2	—	—	—
Grapefruit Squash ..	1	—	1	1	—	1	—	—	—
Lemon Squash ..	1	—	1	1	—	1	—	—	—
Malt Cocoa Spread ..	1	—	1	1	—	1	—	—	—
Pea Flour	1	—	1	1	—	1	—	—	—
Jam	1	1	2	1	1	2	—	—	—
Custard Powder ..	1	—	1	1	—	1	—	—	—
Fine Oatmeal ..	1	—	1	1	—	1	—	—	—
Cornflour	1	—	1	1	—	1	—	—	—
Marmalade	1	—	1	1	—	1	—	—	—
Compound Pepper ..	2	—	2	2	—	2	—	—	—
Bacon	—	2	2	—	2	2	—	—	—
Gin	—	1	1	—	—	—	—	1	1
Malt Vinegar ..	—	1	1	—	1	1	—	—	—
Ice-cream	—	4	4	—	4	4	—	—	—
Beer	—	1	1	—	1	1	—	—	—
Glycerine	—	1	1	—	1	1	—	—	—
Cod Liver Oil ..	—	2	2	—	2	2	—	—	—
Butter flavour ..	—	1	1	—	1	1	—	—	—
Rose Hip Syrup ..	—	1	1	—	1	1	—	—	—
Flowers of Sulphur ..	—	1	1	—	1	1	—	—	—
TOTAL ..	414	776	1190	379	771	1150	35	5	40

The following table shows the average percentage of fat and solids not fat in milk samples (formal and informal) analysed by the Public Analyst each month during 1945.

Month			No. of samples.	Average percentage of fat.	Average percentage of solids not fat.
January	..	..	56	3·760	8·878
February	..	..	58	3·595	8·788
March	..	..	62	3·575	8·781
April	..	..	86	3·480	8·807
May	..	..	87	3·428	8·868
June	..	..	75	3·516	8·992
July	..	..	98	3·590	8·900
August	..	..	67	3·698	8·869
September	..	..	76	3·755	8·898
October	..	..	93	3·836	8·890
November	..	..	79	3·807	8·875
December	..	..	58	3·730	8·838
AVERAGE ..			74·5	3·647	8·865

The standard for milk under the Sale of Milk Regulations 1939, is Fat 3·0 per cent and Solids not Fat 8·5 per cent.

Of the 158 informal samples of milk which were tested by the Inspectors during the year by the Gerber process ; 12 or 7·5 per cent were found to be adulterated.

In the following instances legal proceedings were instituted with the results shown :—

Possession for sale of milk containing	} Fined 10s. & £1. 1s. 0d. costs in each case.
4% added water	
„ „ „ 6% „ „	
„ „ „ 4% „ „	Total £4. 13s. 0d.

Sale of milk containing	} and costs
added water 3·4%	
„ „ „ 7%	
„ „ „ 7·1%	
Fined £3. 0s. 0d.	£4. 2s. 0d.
£5. 0s. 0d.	
£5. 0s. 0d.	

Sale of milk containing						
	added water	4·7%				
„	„	„	„	„	7·1%	
„	„	„	„	„	4·2%	
„	„	„	„	„	5·0%	
„	„	„	„	„	12%	
„	„	„	„	„	10·6%	
„	„	„	„	„	5·0%	
„	„	„	„	„	6·0%	
„	„	„	„	„	3·3%	
„	„	„	„	„	5·0%	
„	„	„	„	„	17%	
Sale of milk deficient in fat	4%					
„	„	„	„	„	„	21%
Obstruction (i.e refusal to sell milk for analysis)						

Total fine £8. 0s. 0d. and costs £6. 4s. 0d.

Fined £5 with £2. 11s. 6d. costs.

Fined £3 with £7. 13s. 6d. costs.

Fined £5 with £4. 4s. 0d. costs.

Fined £2 with £3. 12s. 6d. costs.

Fined £2 with £2. 11s. 6d. costs.

Fined £5 with £2. 11s. 6d. costs.

Fined £1 with 10/- costs.

Fertilizers and Feeding Stuffs Act, 1926.

The table below shows the samples taken under the above Act during 1945.

Fertilizers.

	Satisfactory.	Un-satisfactory.	Total.
Sulphate of Ammonia ..	4	—	4
Dried Blood ..	1	—	1
Raw Bone Meal ..	2	—	2
Tomato Fertilizer ..	2	2	4
Nitrate of Soda ..	3	—	3
Bone Meal ..	1	—	1
Basic Slag ..	—	1	1
TOTAL ..	13	3	16

The Pharmacy and Poisons Act, 1933.

This Act permits the sale of poisons in Part 2 of the Poison List by persons whose names and premises are entered in the Local Authority's list. During 1945, seventy-five applications for entry on the list were received and after enquiry and inspection, seventy-three were approved and two refused.

MATERNITY AND CHILD WELFARE.

Dr. I. McD. Harkness, Senior Medical Officer for Maternity and Child Welfare, reports as follows :—

The Maternity and Child Welfare Staff consists of the following medical, nursing and clerical personnel.

- Medical Staff :** Four full-time and three part-time doctors.
- Non-medical Staff :** The chief health visitor.
 Two assistant supervisors of midwives.
 One health visitor with special ophthalmic duties.
 Eighteen health visitors.
 Thirty midwives and one relief midwife.
 Seven full-time and one part-time clerks.

Municipal Domiciliary Midwifery Service.

This service continues to work very much handicapped by lack of staff. There is a slight decrease in the number of cases delivered in 1945 when compared with the 1944 figure. There is once again a fairly high number of emergency midwifery cases—a considerable increase over the year 1943 and 1944. The difficulty of housing accommodation is largely responsible.

The work to save premature babies is being carried on under circumstances which are poor. Hospital accommodation requires to be brought up to a much higher level than at present. An arrangement now exists whereby women who go into labour prematurely are as often as is reasonably possible admitted to hospital before the child is born. Hospital results are much better than those outside on the district where midwives—already overworked and handicapped by circumstances quite beyond their control—do succeed by dint of much sacrifice of their own time to keep many premature children alive.

City Midwives.

1.	The number of cases delivered as Midwives	..	2,388
2.	„ „ „ „ Maternity Nurses		205
3.	„ „ „ „ Emergency	..	64
4.	„ „ Medical Aid forms sent to Doctors—		
	(a) for Mothers	.. ..	558
	(b) for Babies	.. ..	95
5.	„ „ Stillbirths occurring in cases under 1		31
6.	„ „ Notification of death of baby in cases—		
	(a) under 1	.. . . .	32
	(b) under 2	.. .. .	—
7.	„ „ Notification of Artificial feeding	..	85
8.	„ „ Notification to be a source of infection		21
9.	„ „ Post-Natal visits to mothers	..	46,711
10.	„ „ Ante-Natal visits to mothers	..	13,035
11.	„ „ Special visits to mothers	.. ..	2,211

Midwives.

The total number of midwives who notified intention to practice throughout the year 1945				..	..	121
Total practising in the area at the end of 1945				..		108
(a)	Number employed by L.S.A. Domiciliary			..		31
	In Hospital			..		41
(b)	„	„	„	Nursing Homes and Nursing Co-operations		12
(c)	„	„	„	Voluntary Associations—		
				Domiciliary	..	1
				In Hospital	..	13
(d)	„	„	„	Private Practice		10
Number of inspections and visits to midwives				..	..	180

Medical assistance for Midwives :—

		City Midwives.	Private Midwives.	Nursing Homes.
Assistance for Mother	..	558	50	9
„ „ Child	..	95	10	5

Fees paid to Medical practitioners for assistance to midwives during 1945 .. £797. 7s. 0d.

Ophthalmia Neonatorum.

Number of cases notified	..	..	..	104
Total number of visits paid to homes in connection with eye diseases of infants	..	..	..	2,447

Puerperal Pyrexia.

Cases Notified	..	..	..	34
Visits paid to homes in connection with Puerperal Pyrexia	..	..	..	24

Maternal Mortality.

Sepsis	..	..	..	4
Other Causes	..	..	..	3
			—	7

X-Ray Facilities for Expectant Mothers.

Cases referred from Consultant Clinic	41
---------------------------------------	----	----	----

Consultant Clinic.

Sessions	..	..	..	..	49
First Visits	..	..	..	..	393
Return Visits	..	..	..	..	378
				—	771
Average per session	..	..	..	..	15·7

Record of visits.

Visits to Expectant Mothers	..	..	..	70
„ Post-Natal Mothers	..	..	..	172
Visits re Still-births	..	..	..	20
„ Puerperal Pyrexia	..	..	..	24
„ Eye conditions	..	..	..	2,447
„ Pemphigus	..	..	..	9
„ Other Skin conditions	..	..	..	11
Visits to Premature Babies	..	..	..	16
„ Nursing Homes	..	..	..	18
Other Visits	..	..	..	31
Visits and Inspections of Midwives	..	..	..	180
2,768 Priority Dockets for Sheets issued to 943 Expectant Mothers.				

Puerperal Pyrexia.

DISEASE.	Cases notified.	Admitted to Hospital.	Cases arising in Hospital	Deaths.	Age Groups.			
					15-20	20-25	25-35	35-45
Puerperal Pyrexia	34	5	25	0	6	9	16	3

Ophthalmia Neonatorum.**104 Cases.**

Notified.		Treated.		Results.			
By Institution	By Doctors & Midwives	At Home	In Hospital	Vision Unimpaired	Vision Impaired	Total Blindness	Deaths
1	103	94	10	104	0	0	0

Ante-Natal and Post-Natal Clinics.

CLINIC.	No. of Sessions.	New Patients.	Return Visits.	Post Nats.	Total Attendances.	(Approx.) Average per Session.
ASPLEY ..	99	369	1,750	54	2,173	21·9
BULWELL ..	49	326	1,221	30	1,577	32·2
BASFORD ..	48	312	1,225	24	1,561	32·5
EDWARDS LANE	49	213	841	53	1,107	22·6
HUNTINGDON STREET ..	99	684	2,324	56	3,064	30·9
RADFORD ..	149	781	3,322	125	4,228	28·4
SNEINTON ..	99	532	2,126	44	2,702	27·3
WILFORD ROAD	100	442	1,818	43	2,303	23
CONSULTANT CLINIC ..	692	3,659	14,627	429	18,715	(27)
	49	393	378	(50)	771	15·7

NURSING HOMES.

No new homes were registered during 1945. 56 inspections were made by an assistant medical officer of health and assistant supervisor of midwives. There were twelve nursing homes on the register providing 78 beds in all of which 38 were maternity and 40 for other cases.

Home for Unmarried Mothers, 1 & 95, Queen's Drive.

The matron, Mrs. Bayley reports that during the year 14 expectant girls were admitted and 18 mothers with 18 babies. 32 mothers were discharged. The valuable work done goes on and the health of both mothers and babies is maintained at a high level considering the circumstances surrounding many of these cases.

The total attendances made by children in the nursery at 95, Queen's Drive during the year were 9,245.

Infant Mortality.

The infant mortality rate in Nottingham has again been lowered and is the lowest ever recorded—53 per 1,000 live births. For the first time the Nottingham figure is satisfactorily comparable with the figure given for the 126 County Boroughs and Great Towns (including London) in England and Wales.

Of 279 deaths 129 were neo-natal deaths. Pneumonia and prematurity as causes of death showed a great increase over the figures of 1944 when 96 neo-natal deaths occurred. Deaths between one month and 1 year of age numbered 150 compared with 225 in 1944 when an epidemic of gastro-enteritis accounted for 79 deaths as compared with 34 in 1945.

Much remains to be done particularly in our attempts to lower the neo-natal rate.

Health Visiting.

Primary Visits	..	..	..	..	5,032
Re-visits under 1 year	..	..	..	..	22,328
					<hr/> 27,360
Other Visits under 1 year	..	..	..	..	236
					<hr/> 27,596
					<hr/> <hr/>
Re-visits, 1 year—5 years	..	..	..	..	40,551
Other visits	..	..	..	..	214
					<hr/> 40,765
					<hr/> <hr/>

Total Attendances at Infant Welfare Centres.*Total Attendances of New Cases :—*

(a) Children up to 1 year	..	..	..	3,440
(b) Children from 1–5 years..	..	..	..	188
				<hr/> 3,628
				<hr/> <hr/>

Total Attendances of all Babies up to 5 years.

(a) Children up to 2 years	..	..	..	55,777
(b) Children from 2–5 years	..	..	..	4,349
				<hr/> 60,126
				<hr/> <hr/>

Total Number of Sessions held during 1945.

(a) Infant Clinics	..	..	..	1,042
(b) Toddlers' Clinics	..	..	..	291
				<hr/> 1,333
				<hr/> <hr/>

Number of Sessions held weekly average $26\frac{1}{2}$

CHILD LIFE PROTECTION.

Cases on the register 31st December, 1944	..	154
,, registered during 1945	.. ..	138
,, removed from the register	.. ..	152
,, on the register 31st December, 1945	..	140

The 152 cases removed are made up as follows :—

(1) Given into the care of relatives	..	63
(2) Adopted	.. ..	71
(3) Social Welfare Committee	..	3
(4) Education Committee	.. ..	1
(5) To other Local Authorities	..	8
(6) Died (acute lobar pneumonia)	..	1
(7) Cases removed from the register on attaining 9 years of age	..	5

152

Number of visits paid to homes by Health Visitors in connection with the above Act	.. ..	925
Visits to Institutions	.. ..	5
Number of interviews at Health Department		70
Number of foster mothers on register plus 1 Institution with 40 children	..	95
Pending adoption	.. ..	52
Office interviews concerning adoption	..	395

**ADOPTION OF CHILDREN, SECTION 7 OF THE ADOPTION
OF CHILDREN (REGULATION) ACT, 1939.**

(a) Number of persons who gave notice under Section 7 (3) during the year	.. ..	73
(b) Total number of children in respect of whom notice was given under Section 7 (3) during the year	.. ..	73
(c) Number of children notified under Section 7 (3) :—		
(1) Under supervision at the end of the year	.. ..	40
(2) Who died during the year	..	1
(3) On whom inquests were held during the year	.. ..	Nil.
(d) Particulars of any proceedings taken during the year	.. ..	Nil.

ORTHOPAEDIC REPORT.

Report of work done by the Cripples Guild for the Health Department.

New Cases	..	..	..	309
Total attendances	..	..	..	3,597
Appliances provided	..	..	..	53
X-ray examinations	..	..	..	17
Cost of Out-patients	..	..	..	£310. 15s. 4½d.
Cost of splints	..	..	..	£115. 0s. 5d.
Cost of boots	..	..	..	£16. 10s. 4d.
Cost of X-ray	..	..	..	£10. 7s. 4d.
Individual attendances	..	..	..	618
In-patient cost	..	..	..	£241. 6s. 3d.
In hospital at 31/12/44	..	..	..	2
Admissions in 1945	..	..	..	9
Discharged in 1945	..	..	..	9
In hospital at 31/12/45	..	..	..	2

ATTENDANCES AT CENTRES, 1945.

CENTRE.	Infant Sess.	New Cases.	Attend- ances.	Average Attendance.
ASPLEY ..	148	411	7,418	50·1
BASFORD ..	48	257	4,743	98·8
BULWELL ..	100	255	4,892	48·9
HUNTINGDON ST. ..	102	367	4,861	47·6
HYSON GREEN ..	100	330	5,104	51·0
JARVIS AVENUE ..	50	188	3,429	68·5
LENTON ABBEY ..	51	55	1,337	26·2
RADFORD ..	149	601	8,722	58·5
EDWARDS LANE ..	97	290	5,614	57·9
SNEINTON ..	98	421	4,387	44·7
WILFORD ROAD ..	99	344	5,270	53·2
	1,042	3,519	55,777	—

ATTENDANCES AT CENTRES, 1945—*contd.*

TODDLERS.	No. of Sessions.	New Cases.	Attends.	Average Attendance.
ASPLEY	45	4	760	16·9
BASFORD	22	15	366	16·6
BULWELL	24	14	431	18·0
HUNTINGDON ST. ..	23	13	397	17·3
HYSON GREEN	—	3	101	—
JARVIS AVENUE	20	8	237	11·8
LENTON ABBEY	—	—	30	—
RADFORD	50	15	821	16·4
EDWARDS LANE	45	13	620	13·8
SNEINTON	25	23	297	11·9
WILFORD ROAD	25	1	289	11·6
	279	109	4,349	—

Day Nurseries.

The position is as before in our nurseries—long waiting lists.

Eight candidates sat the examination of the National Society of Children's Nurseries and 7 were successful. The usual inspections by inspectors from the Ministry of Health and the Ministry of Education were carried out. During the year we had the misfortune to lose—through ill-health—the services of the capable supervisor to whom the nurseries owe much.

The total attendances were as follows.

Children	0 — 2	—	21,883
„	2 — 5	—	50,516
Total			72,399.

BIRTH CONTROL.

The Health Committee makes a grant towards a Birth Control Clinic known as the Nottingham Women's Welfare Centre. Its sessions are on Monday at 2 to 4.30

p.m., at the Methodist Church, Shakespeare Street (side entrance, Shakespeare Villas). During the year 126 women were given forms of recommendation by various Health Committee clinics or hospitals, but only 78 are recorded as having availed themselves of the facilities of this voluntary agency.

DOMESTIC HELPS.

The need for an organised system of providing domestic service in homes requiring emergency help through illness or old age has long been recognised. Powers to make such arrangements have already existed under the Maternity and Child Welfare Acts, and locally some provision was made for helps in houses where the mother was being confined. But it was on a small scale.

In December 1944 the Minister of Health published Circular 179/44, giving extended powers by which such a scheme could be operated on behalf of all sick and infirm persons, and the Minister agreed to reimburse the expenditure incurred in administration. Thus two schemes could be operated, the Maternity Home Help Scheme and the Domestic Help Scheme, the two differing in that the latter received Government grant.

Locally the Social Service Emergency Committee, a voluntary organisation, had endeavoured to run such a service, and with some, though small success, owing to the real difficulty of finding women suitable for employment as helps. This is the difficulty invariably experienced, one which has killed many a home help scheme in the past.

The issue of Circular 179/44 enabled the Corporation to negotiate with the Social Service Emergency Committee

and ultimately, to take over the home helps so employed, and with them to start a Municipal scheme. This began in February 1945.

It has been found that home help schemes, even when only a moderate number of women are employed, require a lot of detailed administration, as all applicants for help must be visited to verify the real need and to discuss arrangements. The assessment of payments to be made, and arrangements for despatching and paying the helps, involve the employment of a suitable organiser, with clerical assistance, and the overhead expenses are, therefore, rather high in proportion to the extent of the assistance provided. It is, however, well worth while to spend money on such an essential service, and the benefits conferred during awkward domestic crises are great.

The Health Committee was able to engage as a whole-time servant, Mrs. Gray, who had been working in the Home Help Scheme of the Social Emergency Committee. Mrs. Gray presents the following account of the work during its first year:—

Domestic Help Scheme, Period 12/2/45 to 31/12/45.

At the commencement of the scheme eight women were employed on ten cases weekly; this number steadily increased until twenty-two women were working on twenty-four cases per week. These numbers remained almost constant until the end of December; since then they have increased to thirty women and approximately forty-seven cases.

During the period 12/2/45 to 31/12/45, 290 applications for help were received. Of these, 113 were granted help, the amount varying from three or four hours per week

to 54 hours. In some cases two or three weeks covered the help needed, in others, such as old-age pensioners and invalids, the help has continued for as long as required.

The types of cases vary considerably, i.e. during the week ending 15/11/45, 24 cases received help, viz :—

- 7 cases returned from hospital following operations.
- 6 Old-age pensioners
- 4 cases of Chronic arthritis
- 2 „ „ tuberculosis
- 2 Confinement cases
- 1 Heart and pneumonia
- 1 Cancer
- 1 Ordinary sickness

The charge made for services of the home helps is 1s. 6d. per hour ; all applicants express satisfaction with this charge. In some cases the weekly cost runs to a fairly high figure, i.e. confinement case frequently amounts to £3 to £4 per week. The helpers are paid 1s. 6d. per hour, plus bus tokens for travelling.

The home helps are a very varied group of women, coming from homes of all types, some very definitely only fit for working-class homes, others capable of taking charge of any home in the city. They are mostly part-time workers. Numerous letters of thanks have been received from persons helped by the scheme, especially in cases where the husband would have had to remain at home in order to look after a sick wife and small children. Old-age pensioners too are very, very grateful for the help supplied, although it may only be three hours a week.

Figures for this period are as follows, 12/2/45 to 31/12/45 :—

Cases received	..	..	..	290
Cases helped	..	..	..	113
Full cost met by	..	..	..	106

*Remission	{	Old-age pensioners . . . . .	..	..	5 no charge
cases	{	Chronic invalids . . . . .	..	..	2 (1 paying
					2s. 6d. a
					week and
					1 paying
					10s. per
					week).

*Reimbursement claimed from Ministry of Health in these cases.

Of the remaining number, 50% are cases which are not applicable to this scheme. Others, some found help from relations or went into hospital for treatment.

Figures for April 1946 have reached the following :—

30 Home helps working on an average 45 cases per week.

Cases received . . . . .	..	..	378
Cases helped . . . . .	..	..	206

NURSING.

Civil Nursing Reserve.

The local organisation for the Civil Nursing Reserve continued to function under the direction of the Local Emergency Committee of the Nursing Profession (Secretary :— Miss Kirrage, New Square, Low Pavement).

The costs are provided by the Health Committee but reimbursed by the Ministry of Health. Towards the end of the year the Ministry published its arrangements for the release of members from their war-time obligations. At the same time the Minister said he was considering the establishment of a new National Reserve of Nurses comprised of those no longer working regularly, but able and willing to offer whole-time or part-time service in an emergency, such as a widespread or local epidemic, or

abnormal pressure on a hospital. Therefore, any members of the Civil Nursing Reserve released could be re-enrolled to form a basis for the National Reserve.

A recruiting drive was initiated to secure enrolments and re-enrolments.

District Nursing.

There are very few areas in the city in which district nurses are not readily available. The arrangements outlined in previous reports, by which the various voluntary associations receive substantial financial help from the Corporation, still hold good.

AGENCIES FOR THE SUPPLY OF PRIVATE NURSES.

The Minister of Health brought into operation Part 2 of the Nurses Act 1943 on 15th October 1945. After that date no agency for the supply of private nurses can function unless licensed by the Local Authority. This brings such agencies under the supervision of the Health Department, and ensures that employers of private nurses will be informed whether the person engaged is a state-registered nurse or an enrolled assistant nurse.

The Nurses Act also safeguards the title of nurse, which may not be used except by persons having the necessary training and qualifications. There are only two Nurses' Agencies licensed in the City of Nottingham.

ALMONERS' DEPARTMENT.

Report by the Chief Almoner, Miss M. Benham.

The filling of the almoner's role with the right balance, perceiving which patients need close and detailed attention, and seeing that they get it, is rather a solemn responsibility. An enquiry recently made on patients discharged from a hospital in Oxford showed that approximately 75% of those whose disability persisted beyond three months after their discharge might have recovered more quickly if the hospital had had time and facilities for a closer follow-up of its patients, and had been able to make better arrangements for them on return to their own homes. In addition the report pointed out that even in a new, comprehensive and rationally planned system of medical services the greater part of these patients' difficulties would remain, because they were social not medical difficulties. The almoner may well miss some of the people in whose cure she should be able to help, and she must depend a great deal on the other members of clinic and hospital staffs, in particular the medical and nursing members, to keep an awareness of this danger, and to refer patients to her. At the V.D. Clinic and the Tuberculosis Clinic, the system provides for all new cases to be seen by the almoner, but even then circumstances which occur later during treatment may need remedy and may pass unperceived; by the method at the hospital, the almoner knows the particulars given to the City Treasurer's Office for assessment purposes, and discusses each patient with the ward sister in the light of that knowledge. We value very greatly the excellent co-operation which we are getting in our effort adequately to play our part in medico-social service, and only ask for more of it.

The work at the V.D. Clinic has continued to develop. Following-up by visiting is an important part of the work, and 282 visits were made by the almoner or her assistant almoner. 98 of these were in connection with Regulation 33B; that number including visits to 33B patients, (notified once or more), already attending the clinic and defaulting, as well as visits paid in an effort to trace girls or persuade them to attend following the receipt of notification. Special attention is given to cases of early syphilis, and an interesting piece of work undertaken during the year was a special follow-up of these cases. The assistant almoner has kept records for this purpose and has endeavoured to secure regular attendance by giving particular attention to the usual methods: gaining some preliminary knowledge of the nature of the patient and of likely obstacles to treatment at the first interview, and then having this knowledge, following-up failure to attend with letters or visits as seems appropriate to the individual concerned.

The social needs of the patients are wide and varied, and have required reference to many different kinds of agencies. In 7 cases detailed medico-social investigation was needed, and there were several patients for whom unsuccessful attempts were made to solve the very difficult question of accommodation.

At the City Hospital the work has continued on the same plan as during the previous year, but the number of patients coming under the almoner's scope has grown considerably with the post-war increase of civilian beds. As is not surprising under prevailing conditions, patients have presented tangled home circumstances to which they cannot return, and have required considerable aid in

finding a solution which is both medically and socially satisfactory. The "Home Help" scheme has proved useful, and has met a need for 12 patients on their discharge. The numbers sent to Convalescent Homes has increased by 22 this year, and Homes at Ilkley, Southport, Ashover, Matlock, Blackwell and Uttoxeter have in their differing ways served the differing needs and natures of the convalescents. In the maternity department much of the work is in connection with the needs of the mother and child in illegitimate births, and involves careful contact with outside agencies as well as the usual endeavour to ensure suitable environmental and economic conditions on discharge.

Working predominantly with inpatients, a great deal of what is done must relate to plans on and after discharge. Nevertheless, the Ministry of Health circular 5/45 (15th January, 1945) points out that occupation and mental stimulus are of real curative importance for many long term bed cases, and the arranging of what is appropriate for these people is becoming a part of the almoner's job, and an enlargement of her old function of trying to ease the anxieties and home worries of the in-patient. Various arrangements of this kind have been made. A boy with a tubercular spine is taking a course in book-keeping, the Education Department providing a teacher to visit each week, and progress is said to be steady and sustained. Several patients have had instruction in art, also through the Education Department. A boy who had had his leg amputated was found to be interested in stamp-collecting, and the Nottingham Council of Boys Clubs, which has a club specialising in that hobby, agreed to send magazines and "swaps" and to visit him; he hopes to join the club as soon as he is well enough.

At the Tuberculosis Clinic the numbers on the Allowance scheme under Memo. 266/T ceased to increase early in the year, and remains fairly steady with about 230 drawing the allowance each week, and a weekly expenditure of about £360. Despite the inadequacies of the scheme, there are few patients now who will not give up work to take treatment under its provisions. Leaving the scheme when fit for work is a more difficult juncture. Not only must the patient be found the job suited to his physical and mental capacities, but also he must be helped to look forward to leaving the scheme, and while not rushing to the first job offered regardless of suitability, he must certainly not shelter unduly under the continuance of the allowance. The provision for the supplementation of part-time earnings, (a rehabilitation measure which seems likely to be lost under new legislation), has been used in 10 cases during the year, covering the following occupations : light nursery, gardening, clerical work, light van driving, boot repairing in own business, accountancy, light assembly, jobbing gardening, and shop assistant. There seems very little failure in these cases, practically all going on after a few months to full time work with medical consent.

A small part of the Care work is an attempt to meet the inadequacies of the Allowance Scheme ; for example, a prenatal grant is given in appropriate cases to the wife of a man drawing the maintenance allowance only, and an extra nourishment grant has been given to a small boy who is tuberculous, and whose father, the patient, could only draw 5s. weekly for the child under the Ministry of Health scheme. There is a regular need for the provision of beds, bedding, milk at reduced price and pocket money in sanatorium, and a little has been done to provide training in cases not met by other provisions. The shortage of

institutional accommodation both for the advanced case and for the early case in need of rest, increases the demand for help in the home. Both homes and patients vary very greatly, and solutions have been found in the Health Department Home Help Scheme, by payment to a neighbour, or by a grant to pay for the sending out of washing. About 400 families have been considered during the year by Staff Care Conference.

At Heathcoat Street Central Office arrangements are made for the cases coming under the Prevention of Blindness Scheme ; only 9 new cases were accepted during the year. There has also been liaison with the Royal Midland Institution for the Blind regarding domiciliary assistance and general welfare matters, and attendance at the monthly Welfare Committee meetings on behalf of the Medical Officer of Health. Reduction of fees for attendance at home confinement has been made in 196 cases. One girl, the M.D. daughter of a blind man, has had free insulin through the Health Department provision. A small number of " problems " have been referred from various sources, including several from the Chest Radiography Centre, and the central position of the office and its freedom from clinic connection make it a good place for that type of work.

CITY HOSPITAL AND THE FIRS.

Medical Superintendent—C. L. CRAWFORD CROWE, M.D., Ch.B.
(Died 22.4.1946).

Deputy Medical Superintendent—

SIDNEY B. BENTON, M.R.C.S., L.R.C.P.

Pathologist in Charge of E.M.S. Area Laboratory—

ANTHONY H. JOHNS, M.A., M.B., B.Ch., F.R.C.S.E.

Resident Obstetrician—JOHN B. COCHRANE, M.B., Ch.B.

2 *Junior House Physicians.*

2 *Senior House Surgeons.*

2 *Junior House Surgeons.*

3 *Junior Obstetrical Officers.*

1 *Assistant Pathologist.*

Visiting Staff.*Physicians—*

J. WILKIE SCOTT, M.C., M.D., F.R.C.P.

P. H. O'DONOVAN, M.D., F.R.C.P.

*Physician for Venereal Disease—*RADOYE MARINKOVITCH, M.D.*Physician for Tuberculosis—*

J. V. WHITAKER, M.B., Ch.B., D.T.M., D.P.H.

Surgeons—

F. C. HUNT, M.B., B.S., F.R.C.S.E.

J. SWAN, M.B., Ch.B., F.R.C.S.E.

Orthopædic Surgeons—

F. CROOKS, M.Ch., F.R.C.S.E.

A. N. BIRKETT, F.R.C.S.

Ear, Nose and Throat Surgeon—

E. J. G. GLASS, M.B., Ch.B., F.R.C.S.E., D.L.O.

*(Acting—*A. R. A. MARSHALL, M.B., Ch.B., F.R.C.S.E.).*Uro genital Surgeon—*J. L. DAVIES, B.A., M.B., Ch.B., F.R.C.S.*Obstetrical and Gynæcological Surgeon—*

H. JORDAN MALKIN, M.D., F.R.C.S.E., F.R.C.O.G.

*Thoracic Surgeon—*G. A. MASON, M.B., B.S., F.R.C.S.*Radiologist—*

R. A. CLAYTON RIGBY, L.R.C.P., L.R.C.S. (died).

W. J. MOWAT, M.D., D.R.

Anæsthetists—

I. R. SPARK, M.B., Ch.B.

J. C. BUCKLEY, B.A., M.B., B.Ch.

*Dermatologist—*A. D. FRAZER, M.D., D.P.H.*Dental Surgeon—*R. G. L. COE, L.D.S.*Matron—*MISS A. M. ROSE, S.R.N., S.C.M.*Deputy Matron—*MISS A. HOLDER, S.R.N., R.F.N., M.S.R.*Steward—*F. C. LANSDOWN.*Chief Pharmacist to City Hospital and Social Welfare Committee's
Dispensaries—*D. H. S. COX.*Catering Manager (appointed 1946)—*R. E. M. DAVIS.

City Hospital.

Assistant Steward	1	Laboratory Technicians ..	4
Assistant Matron	1	Teachers	2
Ward Sisters	26	Masseuses	2
Night Superintendent ..	1	Cooks (female)	2
Tutor Sisters	1	Assistant Cooks (female) ..	9
Relief Administration Sister ..	1	Chef	1
Superintendent Midwife ..	1	Assistant Chefs	7
Staff: Midwives	9	Maids	30
Male Tutor	1	Kitchen Boy	0
Home Sisters	2	Seamstresses	7
Housekeepers	2	Clerks	4
Theatre Sisters	2	Junior Clerks	4
X-Ray Sister	1	Medical Supt's Secretary ..	1
Staff Nurses	19	„ „ Typists	3
Ambulance Nurses	2	Hospital Porters	41
Student Nurses	148	Telephone Operators	4
X-Ray Clerk	1	Lodge Porters	3
X-Ray Pupils	2	Male Clothing Attendant ..	1
Sub-probationers	5	Female Clothing Attendant ..	1
Ward Orderlies	76	Linen Storekeepers	2
Assistant Nurses	8	Gardeners	3
Maternity Pupils (including 4		Labourers	9
untrained)	26	Window-cleaner and sweep ..	3
Charge Male Nurses	4	Scrubbers	102
Male Nurses (Student)	27	Kitchen Porters	3
Male Staff Nurses	4	Mortuary Attendant	1
Deputy Chief Pharmacist ..	1	Ambulance Drivers	3
Pharmacist, Qualified	1	Canteen Cook	1
Dispensers	4	Canteen Workers	2
Dispenser Apprentice	1	Matron's Secretary	1
Laboratory Technicians,		Radiographer	1
Senior	1	Catering Manager	1

CIVIL NURSING RESERVE.

Ward Sisters	3	} All on full-time duty.
Staff Nurses	3	
Nursing Auxiliaries	6	
Assistant Nurses	10	

The Firs Maternity Hospital.**Staff.**

Matron	1	Typist	1
Sister Tutor	1	Cook	1
Midwifery Sisters	3	Assistant Cook	1
Staff Midwives	6	Kitchen Maids	2
Pupil Midwives—in hospital ..	11	House Maids	5
Pupil Midwives—on district ..	6	Chief Porter	1
Assistant Nurses	2	Porters	3
Daily Cleaners	6	Maintenance Engineer ..	1
Ward Orderlies	7	Gardener	1
Laundry Workers	2	Gardener's Labourers ..	3
Seamstresses	1	Stokers	3

CITY HOSPITAL.

Report made by Dr. S. B. Benton, Acting Medical Superintendent.

Beds—(War-time Accommodation).

Beds allocated to men, women and children are as follows :

Specialised Wards	320
(Tuberculosis, Venereal Disease, Isolation, Maternity and Gynaecology)	
Male Medical	180
Female Medical	154
Male Surgical	222
Female Surgical	114
Children Medical	66
Children Surgical	60
	<hr/>
	1,116
	<hr/>

Averages for the Year.

Beds—Average daily number occupied ..	741
Admissions—Average daily number ..	24·72

Duration of stay of patients :—

Under 4 weeks	6,493
4 weeks and under 13	1,989
13 weeks or more	507
	<hr/>
	8,989
	<hr/>

Maximum number of beds occupied—March 17th.	889
Minimum number of beds occupied—November 7th.	640

Statistical Table for the Year ended December 31st, 1945.

Remaining in hospital, January 1st	..	660	
Admitted	.. ..	7,914	
Born in hospital	.. ..	1,110	
		<hr/>	9,684
Discharged	.. ..	8,286	
Deaths	.. ..	703	
		<hr/>	
Patients treated to a conclusion	.. ..		8,989
Remaining in hospital, December 31st, 1945			695

Comparative Table for Three Years.

	1943	1944	1945
Admissions	8,119	9,188	7,914
Births	1,070	1,148	1,110
Deaths	791	573	703
Admissions—average daily number	25·17	28·24	24·72
Operations performed ..	2,597	3,713	2,755

MASSAGE DEPARTMENT.

		Civilian.	Military.
Number of treatments given :—	..	14,092	16,948
Total .. ..	..	<hr/>	31,040

X-RAY DEPARTMENT.

Civilian In-patients	3,169
Tuberculosis Clinics and Sanatoria	536
Outside Institutions	188
Gynaecological Out-patients	97
Military In-patients	1,740
Military Out-patients	709
	<hr/>
	6,439

Analysis of Investigation of In-patients.

Chests (including Tomographs, Sinograms, Hearts and Bronchograms).	..	..	..	1,674
Alimentary Tract	..	..	..	327
Urinary Tract	..	..	..	212
Gynaecological	..	..	..	236
Bones and joints	..	..	..	628
Biliary Tract	..	..	..	92
				<hr/>
				3,169
				<hr/>

DENTAL DEPARTMENT.

Extractions under :—

Local Anaesthesia	..	..	..	1,387
General	..	..	..	672
Gas	..	..	..	21
Total number of extractions		..	..	2,080
Fillings	..	..	..	22
Scaled and cleaned	..	..	..	73
Dentures supplied	..	..	..	9
„ repaired	..	..	..	7
1 Jaw wire replaced				

THEATRE DEPARTMENT.

Civilian patients—Number of operations	..	1,920
Military „ „ „ „	..	835
		<hr/>
		2,755
		<hr/>

E.P.S. AREA LABORATORY—CITY HOSPITAL.

The Ministry of Health has its Area Laboratory for Nottinghamshire under Dr. A. H. Johns situated in this hospital and during the war years the volume and scope of the work has steadily increased, necessitating expansion of accommodation and increase of technical staff. During 1945, 16,713 specimens were examined ; the greater bulk being contributed by this hospital whose laboratory needs increase rapidly with the popularity of newly introduced methods and tests.

We continue to do a small number of certain tests, not conducted elsewhere in Nottingham, for the other hospitals in the City and County.

The Ministry of Health have sanctioned the transference of the Harlow Wood Side-room Laboratory to larger quarters which are being appropriately altered and furnished for that purpose.

They have also sanctioned the extension and furnishing of other accommodation in this laboratory ; the work to commence immediately.

The foundations are laid for a comprehensive laboratory service for diagnostic purposes capable of accommodating future demands, particularly when associated with the Public Health Laboratory proposed and to be built on adjacent site.

Dr. Johns expresses his indebtedness to the late Dr. C. L. Crawford Crowe for his keen and vigorous support during the period of development of the laboratory from 1937 onwards.

THORACIC SURGICAL UNIT.

This Unit, consisting as it does of special wards for male and female cases, continues to benefit many patients suffering from non-tuberculous conditions of the chest, both for the City and by special arrangements with the County Authorities. Apart from the actual surgical operations, numerous patients are benefited by active conservative treatment by means of breathing exercises and postural coughing. The Visiting Surgeon for Thoracic Surgery is Mr. G. A. Mason, of Newcastle, who brings his own Anæsthetist.

Cases admitted for investigation :—

CITY.		COUNTY.	
Male.	Female.	Male.	Female.
28	14	20	18

Operations performed during the year :—

Pneumonectomy	..	..	8	<div> 2 Carcinoma 2 Cystic Bronchiectasis 1 Residual Bronchiectasis 1 Neoplasm 2 Miscellaneous </div>
Lobectomy	..	..	14	Bronchiectasis
Exploratory Thoracotomy	..	..	5	<div> 1 Inoperable Carcinoma 2 Infected Cystic Cavities 1 Empyema 1 Miscellaneous </div>
Oesophagoscopy	..	..	3	(1 Carcinoma
Deroofing	..	..	2	(2 Chronic Empyema)
Bronchoscopy	..	..	40	(9 Carcinoma)
Bronchogram	..	..	28	
Thorocoscopy	..	..	1	

MATERNITY DEPARTMENT.

(The following statistics supplied by Dr. J. B. Cochrane, the Resident Obstetrician, are summaries only. Anyone wishing to have further details and classifications under the various headings may have them on application).

Total admissions	..	..	..	..	1,549
Total births	..	..	..	..	1,170
Live births	..	..	..	..	1,110
Stillbirths	..	..	..	..	53
B.B.A.	..	..	..	..	6
Spontaneous deliveries	..	..	..	..	958
Assisted abnormal deliveries	..	..	..	..	206
Maternal deaths	..	..	..	1	(=·085%)
Total admissions for ante-natal care	..	..	..	..	907

Total abortions	..	..	..	222
Threatened	..	..	27	
Therapeutic	..	..	25	
Incomplete	..	..	170	
Caesarean sections	..	..	..	67
Forceps deliveries	..	..	..	90
Breech deliveries	..	..	..	41
Persistent occipito posterior positions			..	20
Face presentation	..	..	..	12
Transverse lie with shoulder presentation			..	3
Compound presentation	..	..	..	3
Twin pregnancies	..	..	..	13
Prolapsed cord	..	..	..	3
Craniotomy and Cranioclasty		..	..	5
Foetal abnormalities	..	..	..	28
Ante-partum Hæmorrhage	..	..	..	33
Minor placenta prævia (without A.P.H.)			..	5
Post-partum Hæmorrhage	..	..	..	13
Retained placentæ	..	....	..	13
Primary obstetric shock (apart from P.P.H.)	..			1
Eclampsia	..	..	..	1
Perineal lacerations	..	..	..	249
Intra-uterine foetal deaths	..	..	..	19
Puerperal pyrexia	..	..	..	9
Stillbirths	..	..	..	53
Infant deaths within ten days		..	..	29
Pemphigus neonatorum	..	..	..	Nil
Ophthalmia neonatorum	..	..	..	Nil

Ante-natal Clinic.

Number of cases booked	..	1,044
Cases seen and not booked	..	360
Subsequent ante-natal visits	..	6,173

Total	7,577
-------	----	----	-------

Post-natal clinic

Total visits	..	..	..	859
Number of pupils undergoing Part I training under C.M.B. regulations	..	..	..	35
Number of pupils successful at first attempt	..			24
Number of pupils successful at second attempt				5
Number of pupils who failed after two attempts or did not enter for the examination a second time	..	..	..	6
Total number of pupils passed	..	29	= 83% approx.	
Ante-natal admissions	..	..	..	907
Cases for dental therapy	..	..	..	158
Outpatient	..	..	143	
Inpatient	..	..	15	
Out-patient external versions		..	..	39
Out-patient treatment of leucorrhœa			..	34
Cases of leucorrhœa investigated as out-patients	..			218
V.D. unit. Cases admitted	..	..	..	65
Clinical Gonorrhœa (not proven)	..		4	
Diagnosed gonorrhœa	..	..	31	
Syphilis	..	..	24	
Syphilis and gonorrhœa	..	..	6	

THE FIRS MATERNITY HOSPITAL.

Total admissions	..	..	..	745
Total births	..	..	..	616
Live births	..	..	597	
Still births	..	..	19	
Spontaneous deliveries	..	..	531	
Abnormal deliveries	..	..	85	
Maternal deaths	..	..	1 =	·162%
Total admissions for ante-natal care	..		..	242
Total abortions	..	..	..	23
Cæsarean sections	..	..	..	25
Indications :	..	..	..
Forceps deliveries	..	..	..	44

Breech deliveries	7
Persistent occipito-posterior positions ..	6
Face presentation	1
Twin pregnancy	3
Ante-partum hæmorrhage	4
Post-partum hæmorrhage	24
Retained placentæ	7
Eclampsia	1
Perineal lacerations	171
Intra-uterine foetal deaths	6
Foetal abnormalities	10
Still births	19
Infant deaths within 10 days	8
Puerperal pyrexia	2
Pemphigus neonatorum	Nil
Ophthalmia neonatorum	Nil

Post-mortem :

Acute intestinal obstruction by pelvic peritoneal band,
three days after parturition.

Ante-natal Clinic

Number of cases booked	770
Number of other cases seen but not booked ..	462
Subsequent ante-natal visits	5,105
Total	6,337

Post-natal clinic

Initial visits	505
Total visits	615

Number of Pupils undergoing Part 2 training under
C.M.B. regulations, 1945 28

Number of pupils successful at first attempt ..	24
Passed at third attempt after refresher course ..	1
Failed after two attempts—no further attempt made	3

AMBULANCE TRANSPORT.

Mr. G. W. Gould, Master, Vale Brook Lodge, gives the following particulars of Transport Services conducted for the City Hospital under his management.

	Mileage.		Average mileage per gallon of Petrol consumed.	
	Year ended 31st March.		Year ended 31st March,	
	1946	1945	1946	1945
Austin Ambulance No. 3	578	2,816	7·605	9·811
„ „ 4	5,917	6,748	7·910	7·406
„ „ 5	4,054	9,115	8·832	9·662
„ „ 6	12,235	4,140	9·679	9·539
„ „ 7*	5,040		11·201	
American Ambulance	533	6,382	6·2	9·426
			Gen.	Gen.
	28,357	29,201	Aver.	8·571 Aver. 9·168

* Purchased December 1945.

Number of Patients removed to City Hospital by Ambulance.

	Year ended 31st March,	
	1946.	1945.
Number of Journeys	.. .. 4,482	4,548
„ „ Cases	.. .. 3,129	2,840

Cost per Car mile 1s. 5d. as against 1s. 3½d. in 1944/5.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

NOTIFIABLE DISEASES.

The following is a summary of a more detailed table which is now kept, showing not only the primary notifications but also the final numbers after correction of diagnosis subsequently made either by the notifying medical practitioner or by the medical superintendent of the Infectious Diseases Hospital.

Table (Civilians only).

Disease.	Notifications.	Final numbers after correction.
Scarlet Fever 	994	965
Whooping Cough 	281	276
Acute Poliomyelitis, and Polioencephalitis 	5	5
Measles 	1,806	1,802
Diphtheria 	202	110
Acute Pneumonia 	255	253
Dysentery 	80	77
Smallpox 	—	—
Acute Encephalitis Lethargica ..	—	—
Enteric or Typhoid Fever ..	—	—
Paratyphoid Fevers 	3	3
Erysipelas 	73	71
Cerebro-spinal Fever 	52	17

CITY ISOLATION HOSPITAL, NOTTINGHAM.

The following report is made by Dr. I. M. Librach, the Acting Medical Superintendent.

1274 cases were admitted during the year; 115 remained from the previous year, making 1,389 cases under treatment; 91 cases remained in hospital, so that 1,298 cases were treated to a conclusion.

The number of cases in the previous year was 1,237.

The various diseases treated were as follows :—

Smallpox.

No cases occurred here during the year.

Scarlet Fever.

720 new cases of scarlet fever were admitted during the year, of which 26 were Service Cases. There was 1 death, due to empyema of the chest. The average duration of stay of the other cases was 26·7 days.

There were 33 return cases, giving a rate of 4·6%.

Diphtheria.

123 confirmed cases were admitted during the year, of which 20 were Service cases. This was almost double the number admitted the previous year, which was a record low year, and 123 is a small number compared with earlier records.

6 deaths occurred, all in non-immunised patients, giving a mortality of 4·9%. 26 of the cases had been immunised, with no deaths amongst them.

The average stay in hospital of the cases which recovered was 39·2 days, and for fatal cases 3·7 days.

The predominant strain of organism isolated was undoubtedly the Gravis type, and this type accounted for all the deaths.

As can be seen from the table, mortality was highest in the 2—5 year old group, i.e. the pre-school child, and though our immunisation figures are good, parents will have to be still further persuaded of the priceless value of immunising small children.

There was one case of Laryngo-faucial Diphtheria, and he recovered.

Ages.	Cases.	Deaths.	Mortality per cent.	Numbers Immunised.
Under 1 year ..	1	—	—	—
1— 2 years ..	1	1	100·0	—
2— 5 years ..	32	4	12·5	4
5—10 years ..	32	—	—	9
10—20 years ..	27	—	—	12
Over 20 years ..	30	1	3·3	1
TOTALS ..	123	6	4·9	26

CITY ISOLATION HOSPITAL—1945.

DISEASE.	Remaining at end of 1944.			Admitted 1945.			Total Cases during 1945.	Total Cases finally dealt with in 1945.	Total deaths during 1945.	Case mortality % of Total Cases in 1945.	Days of average residence.		Remaining at the end of 1945.
	Sex.	No. of Patients.	Recovered.	Died.	No. of Patients.	Recovered.	Died.				Non-Fatal.	Fatal.	
Scarlet Fever ..	M.	43	43	..	324	307	1	367	351	1	..	..	16
	F.	40	40	..	396	371	..	436	411	..	..	..	25
Totals ..		83	83	..	720	678	1	803	762	1	·12	26·7	41
Enteric Fever ..	M.	..	..	..	2	2	..	2	2	..	..	..	..
	F.	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..		..	..	..	2	2	..	2	2	..	27	..	..
Diphtheria ..	M.	6	6	..	66	54	2	72	62	2	..	..	10
	F.	9	9	..	57	41	4	66	54	4	..	..	12
Totals ..		15	15	..	123	95	6	138	116	6	4·34	39·2	22
Smallpox ..	M.	..	..	..	..	..	..	..	..	..	..	·	..
	F.	..	..	..	..	..	..	..	..	..	..	·	..
Totals ..		..	..	..	..	..	..	..	..	..	..	..	..
Other Cases ..	M.	11	11	..	222	183	24	233	218	24	..	..	15
	F.	6	6	..	207	168	26	213	200	26	..	..	13
Totals ..		17	17	..	429	351	50	446	418	50	11·21	22·5	28
TOTALS ..		115	115	..	1274	1126	57	1389	1298	57	4·1	28·3	91

Enteric Fever.

2 cases of this disease were admitted, one of each variety, that is, 1 para-typhoid and 1 typhoid. Both recovered.

Meningococcal Meningitis (Cerebrospinal Fever)

15 of these cases were admitted, with 2 deaths.

Tuberculous Meningitis.

9 cases were admitted, and all of them died. The new drug streptomycin was at first thought to be of use in this 100% fatal condition, but early hopes have unfortunately, been unfounded.

Acute Anterior Poliomyelitis and Polio-Encephalitis.

1 case of each variety was admitted, that having encephalitis proved fatal. The other case left the hospital with some degree of paralysis.

Erysipelas.

12 cases were admitted during the year, 4 of them being service cases. All recovered.

Acute Gastroenteritis in Infants.

73 cases of this disease were admitted, of which 19 died, giving a mortality of 26%. The average case was of a less virulent type than in the year previous, which was a high mortality year. Cases under one month old were 3 in number, of which 1 died.

Bronchopneumonia in Infants.

23 cases of this disease were admitted during the year, many of them as Gastroenteritis, which in these cases is usually a secondary complication.

11 cases died, giving a mortality of nearly 50%. Many of these cases, however, were almost moribund on admission to hospital.

Measles.

43 patients were admitted, the great majority of them in the first two months of the year. There were 2 deaths. Measles is only admitted if of great severity, and where home conditions are bad.

Whooping Cough.

9 cases were admitted with one death.

Other Cases.

Apart from the diseases specifically mentioned above, there were 243 other cases admitted.

PENICILLIN.

This most valuable drug was in much better supply towards the latter half of the year, with the result that we have used it quite a lot and found it specially useful in the complications of scarlet fever, such as cervical adenitis, otitis media, rhinitis and so on. It is also of much value in those cases where sulphonamides are indicated but cannot be used owing to kidney damage.

In conclusion, staffing problems made things very difficult throughout the year, but by reducing the stay in hospital, so far as was consistent with safety, of many of the patients, made it possible for us to take in just as many patients, especially scarlet fever cases, even though one ward had to be closed and still is closed.

The valuable work of the staff in this trying year should be placed on record.

SKIN CLINIC.

Dr. A. D. Frazer gives the following account of the work at the Clinic at the Old Turkish baths which has continued along the same lines, and a large number of patients have again applied for treatment. In all there were 6,530 new patients, which were separated into the following categories :—

1. Scabies.

2,996 patients with Scabies applied for treatment. This is about 500 less than during 1944, and shows that the amount of scabies prevailing in the city has steadily decreased.

2. Pyogenic Skin Conditions.

Such as Impetigo, Sycosis, etc. accounted for 1,314 new patients. Treatment with Penicillin ointment has been introduced during the year, and very rapid cures are being obtained.

3. 1,850 patients with **Other skin diseases** attended, and were treated with daily dressings, etc.

4. 370 patients harbouring **Pediculi** (Lice) applied for treatment. In most cases the scalp was affected. D.D.T. is being used as routine, and one treatment is successful in all cases.

TUBERCULOSIS.

Contributed by Dr. J. V. Whitaker, Tuberculosis Officer.

At the present time tuberculosis work in Nottingham is being seriously hampered by four “bottle necks.” :—

- (1) Shortage of institutional beds and of nursing staffs.
- (2) Shortage of houses.
- (3) Inadequate accommodation at Forest Dene Clinic.
- (4) Inadequate medical staffing at Forest Dene Clinic.

Of these considerations the first is the most serious. The second however is not much less important than the first.

At present very much importance attaches to our making the most of such facilities as are already available and every endeavour is being made in this direction. At Newstead Sanatorium and at the Isolation Hospital Sanatorium the beds are invariably maintained fully occupied with the exception of one or two beds reserved vacant for emergencies. The staff at "Forest Dene" devotes considerable time to the re-housing needs of our patients and the Estates Committee makes a generous provision for tuberculous families when allocating houses.

The staff at Forest Dene comprises two medical officers, five health visitors, one almoner and one chief clerk and three assistant clerks. The medical and nursing staffs—who incidentally amongst themselves carry out all the radiography, amounting to nearly four thousand films per year—remain numerically exactly the same as they were in 1938 when the number of patients on the register was only 1020 and the yearly number of films obtained and needing to be read was only 1312. To-day these figures are 2394 and 3711 respectively.

It is of course appreciated that this state of affairs is common to all sections of municipal activity and that it is merely one of many post-war problems.

Having regard to all these circumstances much dissatisfaction is however inevitable—particularly amongst the patients and their families. In relation to this dissatisfaction the almost sympathetic forbearance of the medical practitioners in the City is worthy of being placed on record—relations between these practitioners and the medical and nursing staff of the Forest Dene clinic remain invariably cordial.

During 1945 the work at Forest Dene has proceeded along the lines already indicated in the annual reports for previous years. The natural expansion already observed has been fully maintained and has indeed been augmented by contributions from mass radiography department and also by the development of the work of the almoners' department.

At Forest Dene at the present time the average number of out-patient pneumothorax refills given each week is 50. The current number of out-patients actually receiving pneumothorax treatment at Forest Dene is 96. This latter figure is more than twice the corresponding average figure for in-patients receiving pneumothorax treatment at any one time at Newstead Sanatorium.

Adult family contacts continue to be X-rayed at intervals of three months at the mass radiography department and those showing evidence of tuberculosis are referred to Forest Dene for further investigation and treatment. It is considered that four miniature films obtained at intervals of three months and a fifth after a further interval of six months should suffice for any particular individual "contact."

Child family contacts cannot conveniently be similarly dealt with at the mass radiography department. In their case a clinical examination at Forest Dene is carried out in conjunction with tuberculin testing and the obtaining of a large X-ray film. Latterly and for reasons of convenience reliance has been placed upon the tuberculin patch test—repeated if necessary. Intradermal tuberculin tests have not recently as a rule been used—partly on account of the severe local reactions which had been

obtained in earlier years. In this connection it is to be observed that the “purified protein derivative” of tuberculin (“P.P.D.”) is ordinarily supplied by the manufacturers in two strengths—“first” and “second”—*but* that the second strength is as much as 250 times as potent as the first strength. On two occasions the tuberculosis officer has approached the manufacturers regarding the possibility of supplying an intermediate strength—but this suggestion has not been met with any enthusiasm.

In local authority practice of an out-patient type considerable caution must always be exercised. In certain cases the tuberculosis officers feel that a resumption of the use of the intradermal tuberculin test is necessary and that it will consequently also become necessary to provide the patient with some safeguard against the untoward violent local “allergic” reactions which are prone to occur.

If one considers solely the very restricted group of cases of abdominal tuberculosis occurring in children below the age of five years it is known that the bovine form of tubercle bacillus is nearly always responsible. This is in accordance with what one would expect since the very young child consumes much cows’ milk. In this connection the following table is extremely interesting as showing the effect of efficient milk pasteurisation upon the incidence of abdominal tuberculosis in children below the age of five years. The figures which are the first of their kind have been supplied by the Registrar-General:—

Death Rates from Abdominal Tuberculosis per 1,000,000 Children under 5 years of Age in Each Area. (Actual Number of Deaths in Parentheses).				
	1921	1930	1938	1944
London (administrative County ..	136 (51)	24 (8)	12 (3)	6 (1)
County Boroughs	437 (490)	157 (166)	63 (57)	35 (32)
Urban Districts	366 (390)	134 (139)	77 (66)	42 (42)
Rural Districts ..	252 (176)	92 (57)	63 (31)	60 (37)

From this table it will be observed :

- (1) In 1944 the death rate for London was only one tenth of that in rural districts.
- (2) In 1944 the death rate for London was only one twenty-third of the 1921 level.
- (3) In 1944 the death rate for rural districts remained as high as one quarter of the 1921 level.
- (4) In 1944 the death rate for county boroughs remained six times as high as that for London.

Prior to 1923 no milk was pasteurised under licence. By 1938 over 50% of the milk consumed in county boroughs was pasteurized and over 98% in London: It therefore becomes conclusively evident that in the elimination of abdominal tuberculosis in very young children *the* factor of importance is the pasteurization of milk.

If by way of contrast one considers non-pulmonary tuberculosis *as a whole*—including abdominal, glandular, bone and joint, kidney tuberculosis and meningitis—the following two facts emerge :—

- (1) *In the aggregate* approximately three quarters of the cases are *not* of milk origin but are of human origin.
- (2) Such cases preponderate in childhood and early adult life.

From these two facts one can deduce a third :—

- (3) In any particular local authority scheme *in which preventive measures are well organised* the year by year ratio of childhood non-pulmonary tuberculosis to adult pulmonary tuberculosis should be a progressively diminishing figure.

In this connection the following table which gives the figures and ratios for Nottingham is of considerable interest :—

Nottingham Tuberculosis Clinic Register			
31st December	Total Non-Pulmonary Children	Total Pulmonary Adults	% Ratio
1940	88	967	9·10
1941	90	1,064	8·45
1942	96	1,256	7·64
1943	73	1,345	5·42
1944	96	1,583	6·06
1945	119	1,850	6·43

The peculiar ratio for 1943 is considered to be attributable to inexperienced clerical assistance at Forest Dene in that year. The slight rise in the ratio for 1945 reflects a rather appreciable quantitative diminution of the health visiting done in that year by reason of absence from duty owing to illness and certain other reasons of some members of the health visiting staff.

The ratio of the number of cases of childhood non-pulmonary tuberculosis to adult pulmonary tuberculosis has fallen from 9·10% in December 1940 to 6·43% in December 1945. Whilst it is not claimed that this diminution of this ratio to two thirds over a five year period is truly representative of the factual position—yet it is nevertheless believed that it does constitute an

index of the efficiency and degree of solidity of the preventive methods which have been adopted in Nottingham.

As in previous years addresses were given by the tuberculosis officer, the senior health visitor and the senior almoner to thirty-six students reading for social science diplomas in the Department of Economics and Commerce at the Nottingham University College. An address was also given by Dr. Tozer to the Nottingham Medico-Chirurgical Society.

Interest continues to be focussed upon the search for an "antibiotic" substance which might be capable of destroying or inhibiting the tubercle bacillus in the tissues. During the year each of the tuberculosis officers has received and has gladly accepted an invitation from Messrs. Boots' Drug Company to inspect the work which their research scientists are at present carrying out in this particular field.

Work of this kind is still very much in its experimental stage but the product "streptomycin" which is an antibiotic obtained from an actinomyces found in soil appears to have given some promising results in checking tuberculosis especially in those types of case in which the tuberculous lesions in the tissues have been blood borne.

Streptomycin has been used by itself and also in conjunction with the product "promin" which was discovered rather less recently. Penicillin is of course useless in tuberculosis work—indeed in Nottingham it is not used even in cases of secondarily infected tuberculous empyema since it has latterly been demonstrated that tubercle bacilli actually thrive in its presence.

Much attention is being paid to the potentialities of "B.C.G." (i.e. Bacille Calmette-Guérin) vaccination against tuberculosis in Denmark and in the other Scandinavian countries. The underlying idea is to confer upon the individual an artificial and controlled degree of protection against tuberculosis infection. Susceptible (i.e. Mantoux negative) members of hospital staffs have been systematically vaccinated. The usual dose administered intracutaneously contains 500,000 avirulent bovine tubercle bacilli. The Danish National Tuberculosis Association are in favour of an extension of B.C.G. vaccination particularly for young persons between the ages of 15 and 25. In Denmark B.C.G. vaccination has increased to such an extent between 1940 and 1945 that there is now a prospect of all school children between the ages of 10 and 14 being vaccinated during the next two years.

At the time of writing this report there is much evidence of an increased and widespread alertness to the necessity of checking tuberculosis. In Great Britain U.N.R.R.A. has published its "Symposium of Current Thought" concerning the disease with the idea of promoting anti-tuberculosis work in Allied liberated countries and elsewhere. In both Northern Ireland and also in the Irish Free State very considerable administrative developments in the control of the disease are taking place almost simultaneously. In the latter area one useful original provision lies in the adapting—when necessary and feasible—of existing houses by the addition of an extra room for sleeping and segregation purposes, the cost being met by a grant from the local authority. This is a simple measure which might with greater frequency be adopted in this Country.

Work of the Tuberculosis Clinic—"Forest Dene"—1945.

Number of persons on the Clinic Register, 1/1/46. 		1,932
New patients examined during the year excluding contacts 	1,831	
Contacts examined during the year ..	486	
Cases returned after having been lost sight of and cases transferred from other areas..	38	
<i>Add</i>	—	2,355
		4,287
Cases written off the register as "recovered"	31	
Patients written off as found to be non- tuberculous or notified in error ..	1,692	
Transferred to other areas or lost sight of ..	52	
Deaths 	195	
<i>Subtract</i>	—	1,970
		—
Number of persons on the clinic register 31/12/45 ..		2,317
		==

		Pulmonary.	Non- pulmonary.	Total.
A. New cases (excluding contacts).				
(a) Definitely tuberculous ..	523	49		572
(b) Diagnosis not completed	—	—		—
(c) Non-tuberculous	—	—		1692
B. Contacts.				
(a) Definitely tuberculous ..	53	—		53
(b) Diagnosis not completed	—	—		—
(c) Non-tuberculous	—	—		433
C. Cases written off the register as :—				
(a) Recovered 	26	5		31
(b) Non-tuberculous including cases notified in error and cancelled 	—	—		1,692

	Pulmonary.	Non-pulmonary.	Total.
D. Number of cases on the clinic register	31.12.45.		
(a) Definitely tuberculous	.. 2,093	224	2,317
(b) Diagnosis not completed	—	—	—

Number of consultations with Medical Practitioners.

(a)	Personal	..	..	not recorded	
(b)	Other (in writing)	..	..	..	2,089

Number of visits by Tuberculosis

Officers to homes including

personal consultations at homes 115

Number of visits by Health visitors to homes

Number of visits by Health visitors to homes .. 4,985

Number of attendances by patients at the clinic for :—

(a)	Examinations	..	..	..	3,593
(b)	X-ray	..	..	..	3,399
(c)	Treatment	..	..	..	1,751
	Total attendances		..	..	— 8,743

Number of X-ray films obtained at clinic ..

Number of X-ray films obtained at clinic	3,399
--	-------

Number of X-ray screen examinations made

Number of X-ray screen examinations made	..	1,547
--	----	-------

Specimens sent to the laboratory

Specimens sent to the laboratory	944
----------------------------------	----	----	-----

Blood sedimentation tests carried out

Blood sedimentation tests carried out 182

Analysis of Cases on Clinic Register on 31/12/45.

Type.		Pulmonary.				Non-pulmonary.				Grand Total.
		Adult.		Child.		Adult.		Child.		
		M.	F.	M.	F.	M.	F.	M.	F.	
Class T.B.										
Minus	..	647	740	122	113	—	—	—	—	1,622
Class T.B.										
Plus	..	188	275	0	8	—	—	—	—	471
Non-pulmonary		—	—	—	—	60	45	61	58	224
										2,317

Analysis of Treatment given at Forest Dene.1. *Artificial Pneumothorax.*

No. of Patients.		No. of Attendances.		Total Attendances
M.	F.	M.	F.	
53	76	729	1,009	1,738

2. *Gold.*

No. of Patients.		No. of Attendances.		Total Attendances
M.	F.	M.	F.	
—	1	—	13	13

1,751

Patients admitted to Institutions during the Year 1945.*Newstead Sanatorium:*

Males..	..	124	} Pulmonary.
Females..	..	106	
Children	..	52	
		<hr/> 282	

City Isolation Hospital :

Females..	..	65	} Pulmonary.
Children	..	2	
		<hr/> 67	

City Hospital :

Males ..	..	42	} Pulmonary.
Females..	..	33	
Children	..	3	
		<hr/> 78	

Males ..	..	9	} Non-Pulmonary.
Females..	..	12	
Children	..	3	
		<hr/> 24	

Outside Sanatoria :

Males ..	..	1	} Pulmonary.
Females..	..	1	
Children	..	3	
		<hr/>	
		5	
		<hr/>	
Males ..	..	2	} Non-Pulmonary.
Females..	..	1	
Children	..	4	
		<hr/>	
		7	
		<hr/>	

NEWSTEAD SANATORIUM.*Report by the Medical Superintendent (Dr. G. O. A. Briggs).***New Wards.**

Two new hut wards of 52 beds were almost completed at the end of the year and will be opened fully as soon as the shortage of staff has been overcome. One has since been opened. To mitigate the shortage, nurses with healed pulmonary tuberculosis are now being recruited, also male and female ward orderlies. These latter help to relieve nurses of their more domestic duties.

Additional Staff.**1. Laboratory Technician.**

At present his time is divided between Newstead and the City Laboratory ; but it is expected that in the near future he will become full time at Newstead, where the majority of examinations will be carried out. The City Laboratory will, however, still be available for investigations beyond the scope of this work.

2. Assistant School Teacher.

This appointment was necessitated by an increase in the number of children.

3. Second Ambulance Driver.

Now that there are two drivers it is possible to convey Sanatorium Staff to and from the 'bus stop at Larch Farm. This should help staffing difficulties due to the isolated position of the Sanatorium .

Admissions and Discharges.

Remaining on December 31st, 1944	..	177
Admitted .. .. .	..	282
Discharged—		
Classified cases	237	
Observation cases found to be		
non-tuberculous	13	
Died	31	
<hr/>		
Total discharges and deaths ..	..	281
Remaining on December 31st, 1945	..	178

Artificial Pneumothorax.

New cases induced	82
Refills	2,450

Other Treatment.

Aspiration	58
Bronchogram	2
Mantoux test	68
Gold injection	31
Blood examination	1,306
Diphtheria immunisation	15
Other work	92
Monaldi drainage	1

Thoracic Surgery (at the County General Hospital, Worksop).

Thoracoscopy	54
Phrenic avulsion	5
Phrenic crush	5
Thoracoplasty, stage 1	7
Thoracoplasty, stage 2	3
Korrekturplasty	2
Thoracolysis	2
Bronchoscopy	1

Dental Clinic.

Examinations	248
Extractions	244
Fillings	233
Scaling	45
Dentures	7
Prothesis	20
Multiple Extractions	2

Ear, Nose and Throat Clinic.

Examinations	154
Causterisation	2

Ophthalmic Clinic.

Examinations	55
----------------------	----

X-Ray Department.

Screenings	2,490
Chest films	1,903
Staff films	333
Contact films	232
Bronchograms	1
Bone and joint films	55
Abdomen films	5
Other work	3

Contacts.

Total number X-rayed	212
Normal	130
Healed pulmonary tuberculosis	6
Active pulmonary tuberculosis	12
Under observation	62
Other disease	2

MASS RADIOGRAPHY 1945.

Report by Dr. A. E. Beynon, Medical Director, Chest Radiography Centre.

Mass Radiography in this City has progressed steadily during the past year, in spite of the difficulties experienced in obtaining technical staff to work the apparatus.

Another year's work has shown the value of Mass Radiography in the detection of completely unsuspected Pulmonary Tuberculosis.

The point has been raised as to whether it is justifiable to continue to detect new cases when there are such long lists of people already awaiting admission to Sanatoria. There can be no doubt about the answer to the point! Every effort should be made to detect new cases of Pulmonary Tuberculosis, for in this way the patients can be placed under the care of the Tuberculosis Officer, who will give advice on the precautions to be taken so that the persons will not be a source of danger to others, and whilst they are awaiting admission to the Sanatorium they can be given their treatment at home on Sanatorium lines, so that no time is being wasted. After all, the fundamental treatment of Pulmonary Tuberculosis is rest. Further, the person with a positive sputum that is to say one whose phlegm (sputum) is found to contain the tubercle germ, can be removed from his work and thus diminish the risk of spreading the infection to others working round him. For example, a middle aged person working in a hosiery factory and surrounded by young girls and young women, such a patient may have a good resistance to the complaint and is little affected by it, but, whilst continuing at her job is a source of infection to others. Removal of this person from her job removes a potential source of danger to the younger people around her and it is in the younger people that Pulmonary Tuberculosis advances rapidly, and often fatally.

Results.

The results published by workers in Mass Radiography throughout the British Isles are remarkable for their

consistency. The number of cases of Pulmonary Tuberculosis requiring Sanatorium treatment is three in every 1,000 people X-rayed. This is not a large figure, but the early detection of these cases does give a greater chance of a complete cure, and within a shorter period of time.

Six cases per thousand people X-rayed need further observation at the special out-patient Clinic at the Chest Radiography Centre, Postern Street, and, subsequently, one or two of these observation cases will be proved to have active disease and will require Sanatorium treatment.

STATISTICS

**From the opening of the Centre in May 1944 up to and including
31st December 1945.**

<u>Total number of volunteers</u>			<u>46,893</u>
Females	25,709		
Males	21,184		
No. of persons attending for large films ..	4,929	(10·511%)	
No. of Screening cases	90		
No. of large films taken	8,067		
No. of persons attending for serial X-rays	979		
No. of clinicals and interviews ..	1,680		
Females	864		
Males	816		
<u>Total number of abnormal cases</u> ..			<u>3,832 (8·172%)</u>
1. Tuberculosis of Lungs	2,228	(4·751%)	
(a) <i>Healed lesions</i>	1,721	(3·670%)	
Female cases	855	(1·823%)	
Male cases	866	(1·847%)	
(1) <i>Primary infection</i>	940	(2·0045%)	
Female cases	537	(1·1451%)	
Male cases	403	(0·8594%)	

(2)	<i>Adult infection</i>	781 (1·6654%)
	Female cases	318 (0·6781%)
	Male cases	463 (0·9873%)
(b)	<i>Active lesions</i>	228 (0·486%)
	Female cases	110 (0·235%)
	Male cases	118 (0·251%)

Disposal of Active Cases :

(1)	<i>Referred to Tuberculosis Officer</i>	150
	Female cases	78
	Male cases	72
(2)	<i>Referred to T.O. via Medical Practitioner for Dispensary supervision</i>	23
	Female cases	12
	Male cases	11
(3)	<i>Referred to doctor and Sanatorium</i>	2
	Female cases	1
	Male cases	1
(4)	<i>Referred to Mental Hospital</i>	9
	Female cases	4
	Male cases	5
(5)	<i>Referred to County T. O. via General Practitioner</i>	40
	Female cases	14
	Male cases	26
(c)	<i>Observation cases</i>	279 (0·595%)
	Female cases	179 (0·382%)
	Male cases	100 (0·213%)

II. Non-Tuberculous Conditions of Lungs. 1,604 (3·421%)

Female cases	527 (1·124%)
Male cases	1077 (2·297%)

Disposal :

(1)	<i>Referred to City Hospital via County Authorities for observation (County cases)</i>	..	..	12
	Female cases	..	..	8
	Male cases	..	..	4
(2)	<i>Referred to City Hospital (City cases)</i>	..	..	36
	Female cases	..	..	15
	Male cases	..	..	21
(3)	<i>Referred to General Hospital</i>	..	..	1
	Male cases	..	..	1

Public Sessions.

Public Sessions were tried for a period of six weeks as an experiment, and proved to be a great success. At these sessions no appointments were needed and there was no waiting, and this was greatly appreciated by the volunteers. Although great numbers were not X-rayed the number of cases of active Pulmonary Tuberculosis rose to over FIVE cases per thousand persons X-rayed. The number of non-tuberculous ailments diagnosed was appreciable and was all the more satisfactory as those cases, after full investigation in the City Hospital, were able to benefit from either surgical or conservative treatment.

Non-tuberculous cases.

Close co-operation exists between the Chest Radiography Centre and the City Hospital for the full investigation of the non-tuberculous case of chest disease. At one time there was a list of cases waiting admission for investigation due to the appreciable number detected through the Public Sessions. The large majority of these cases were able to benefit from either surgical removal of

the diseased lung or in the earlier cases, by conservative treatment. The number of cases of cancer of the lung diagnosed was appreciable—some were treated by the removal of the whole of the affected lung whilst the inoperable cases were referred for radium treatment, as a palliative measure.

Expectant Mothers.

Recently Mass Radiography examination has become a routine part of the Ante-natal examination for the women attending at the City Hospital and “ The Firs ” Clinics. Nottingham is believed to be the first City to institute X-ray examination as a routine measure. Thus, expectant mothers who are found to be suffering from active Pulmonary Tuberculosis have their pregnancies terminated before the disease has time to be seriously aggravated by the pregnancy to the detriment of the mother's health in the future.

VENEREAL DISEASES.

Report by Dr. R. Marinkovitch, Director of the Clinic.

New Cases.

There were 3,395 new cases dealt with during the year at the Glasshouse Street Clinics. Out of this number 1,371 were found to be suffering from Venereal Diseases, and the remaining 2,024 were found to be suffering from conditions other than venereal. There has been an increase of venereal and non-venereal cases compared with the year 1944. In Table 1, new cases attending the clinics during the past four years are set out :—

TABLE I

New Cases.

Year.	V.D.	Non-V.D.	TOTAL.
1942	887	505	1,392
1943	1,114	1,117	2,231
1944	1,182	1,766	2,948
1945	1,371	2,024	3,395

It will be observed that the increase in new cases during the year is over 100% compared with 1942.

Venereal Cases.

The term Venereal in this country indicates three diseases, i.e. syphilis, gonorrhœa, and soft sore. There were 1,371 cases of venereal diseases dealt with for the first time at the clinics during the year under review. Out of this number 824 were male patients and 547 were females. In Table 2, Venereal cases are set out according to their sexes.

TABLE II

Sex Incidence Among V.D. Patients during 1945.

Disease.	Male.	Female.	TOTAL.
Syphilis ..	276	226	502
Gonorrhœa ..	539	320	859
Chancroid ..	9	1 ..	10
TOTAL ..	824	547	1,371

The figures are abnormal, as to every female case with venereal disease there should be four male patients with the same condition.

Syphilis.

In Table 3, new cases of syphilis included in the Item 3 of the Annual Return V.D. (R) to the Ministry of Health are analysed.

TABLE III
Analysis of New Cases of Syphilis during 1945.

Stage	Degree.	MALE.			FEMALE.			TOTAL.		
		1943	1944	1945	1943	1944	1945	1943	1944	1945
ACUTE.	1. Sero-negative Primary ..	21	19	50	2	6	11	23	30	61
	2. Sero-positive primary ..	21	19	40	8	23	43	29	42	83
	3. Early Secondary ..	4	13	18	24	15	22	28	28	40
	4. Late Secondary ..	3	11	7	15	38	40	18	49	47
	Latent in first year of infection ..	4	1	3	4	3	7	8	4	10
	TOTAL ACUTE STAGE ..	53	68	118	53	85	123	106	153	241
CHRONIC.	5. Endosyphilis ..	20	9	12	31	26	28	51	35	40
	6. Tertiary and Visceral ..	23	28	18	16	14	17	39	42	35
	7. Neurosyphilis ..	18	8	12	14	7	7	32	15	19
	8. Congenital Syphilis ..	16	10	8	8	28	20	24	38	28
	TOTAL CHRONIC STAGE	77	55	50	69	75	72	146	130	122
	GRAND TOTAL ..	130	123	168	122	160	195	252	283	363

It will be seen from Table 3 that there were 118 male and 123 female patients with early syphilis, making 241 fresh cases in acute infectious stage. During the year 1944, there were 68 male and 85 female patients making 153 in all. There has been a substantial increase in the incidence of acute syphilis during 1945. The increase in both sexes taken together is 57%. In fact during the past 14 years the figures for infectious syphilis have never been so high. The explanation is that the public is more aware of syphilis and the facilities for diagnosis are greater.

The incidence of infectious-acute syphilis according to the sexes during the past 15 years in England and Wales, as well as in Nottingham is given in Table 4.

TABLE IV

Acute Syphilis.

Year.	ENGLAND AND WALES.			NOTTINGHAM.		
	Male.	Female.	TOTAL.	Male.	Female.	TOTAL.
1931	6,421	2,683	9,104	90	30	120
1932	6,196	2,532	8,728	112	44	156
1933	5,949	2,141	8,090	134	33	167
1934	4,888	2,030	6,918	94	39	133
1935	4,226	1,745	5,971	59	26	85
1936	4,033	1,642	5,675	45	14	59
1937	3,986	1,647	5,633	35	16	51
1938	3,744	1,494	5,238	28	9	37
1939	3,574	1,412	4,986	31	10	41
1940	4,029	1,582	5,611	26	5	31
1941	5,023	2,309	7,332	21	17	38
1942	5,470	3,576	9,046	34	24	58
1943	5,159	4,483	9,642	53	53	106
1944	4,384	4,934	9,318	68	85	153
1945	—	—	—	118	123	241

Chronic Syphilis.

Out of 363 cases of syphilitic infection, 122 cases were in the chronic stage. There is a slight decrease in this stage, as in 1944 the figure was 130. In the chronic stage endosyphilis heads the list.

Congenital Syphilis.

During the year there were 8 male and 20 female patients with congenital syphilis. Out of this number two male infants were under 1 year of age, 5 male children over 1 year but under 5 years of age. One male and 20 females were over 15 years of age. Compared with the year 1944 there is a slight decrease of congenital syphilis.

The Diagnosis of Syphilis.

The clinic at Glasshouse Street is equipped with a dark ground microscope for the examination of the exudate from any suspicious genital or extragenital ulcer. Early syphilis is diagnosed quickly and treatment instituted without waiting for the results of blood tests. The blood tests, Wasserman and Kahn tests, are carried out by the City Bacteriologist at Cumberland Place.

The Treatment of Syphilis.

The treatment of syphilis in the acute stage does not present much difficulty. During the year 18 patients—5 male 13 female—have been treated with penicillin. Nearly all these cases had to be admitted as in-patients at the City Hospital. Each patient had 2,400,000 units of penicillin given in a period of eight days. It is too early to state if this dosage is adequate for the cases of primary and secondary syphilis.

With the advent of penicillin in oil suspension more patients will be treated at the V.D. Clinics in the future.

Intolerance to Neoarsphenamine Treatment.

In Table V. the incidence of Dermatitis and Jaundice is shown :—

TABLE V

Incidence of Dermatitis and Jaundice.

Year.	Number of Syphilis patients attending.	Number of patients developing Jaundice.	Number of patients developing Dermatitis.	Remarks.
1943	840	7 (·8%)	3 (·4%)	
1944	1,138	16 (1·4%)	2 (·1%)	
1945	1,236	21 (1·7%)	4 (·3%)	

Gonorrhoea.

During the year there were 859 cases of Gonorrhoea dealt with at this V.D. Centre. Out of this number, 790 came to the Clinic for the first time ; the remaining 69 were diagnosed at other recognised Centres and were transferred to Nottingham for completion of treatment and tests of cure.

For the purpose of this report, these 69 cases are not analysed. Of the 790 fresh infections of Gonorrhoea, 317 were in the female sex and 473 in the male sex. Compared with 1944, there is a slight decrease of Gonorrhoea in the female sex, but marked increase in the male sex. Demobilisation probably explains this state of affairs.

Treatment of Gonorrhoea in both Sexes.

During the year, 220 patients were treated with Penicillin. Patients usually attended three times a day. This meant a day off from work, and Penicillin was given intramuscularly, 50,000 units every three hours until 150,000 units had been given. Later in the year Penicillin in Oil was investigated and it was found that one intra-muscular injection of 200,000 to 250,000 units of Penicillin would cure most, but not all, cases of Gonorrhoea.

Soft Sore—Chancroid.

There were 10 patients with this condition during the year. There is a slight increase in this condition, but this increase has no significance and is probably due to the great care in the classification and diagnosis of non-syphilitic lesions of the genital organs.

Defaulters.

In Table 6, defaulters are analysed according to the sex and the figures are given for the past three years. It will be seen that the general defaulters rate for the year 1945 was 6·6%. This is a great credit to the Medical, Nursing, Clerical and Social Service Staff.

TABLE VI

Defaulters.

Year.	Number of V.D. Cases attending.			Number of Patients ceased to attend.				Total Defaulters.	
	Males	Females	Total	Males Number	%	Females Number	%	Number	%
1943	1,173	683	1,856	83	7·1	44	6·4	127	6·8
1944	1,377	1,135	2,512	156	11·3	64	5·6	220	8·7
1945	1,288	1,167	2,455	111	8·6	52	4·4	163	6·6

Regulation 33B.

The following is a short report of work done under Regulation 33B from 1st January to 31st December 1945 inclusive. The number of Forms 1. received shows no decrease from last year, and the number of patients found and examined is approximately the same. The number of women involved is slightly less, as many women during this period were notified on several occasions.

Contacts notified to the Medical Officer of Health during the period 1st January, 1945 to 31st December, 1945.

	M.	F.
(1) (a) Total number of contacts in respect of whom Form 1 was received		206
(b) Number in (a) transferred from other areas		2
(2) Number of cases in (1) in which attempts were made during the current period outside the scope of the regulation to persuade the contact to be examined before the latter had been named on a second Form 1 :— ..		132
Contacts found 87 (Including those already under treatment)		
Contacts examined or already under treatment 78. + 4 notified on Form 1 last year but not found during that period.		
(3) (a) Number of those in (1) in respect of whom two or more forms 1 were received ..		28
(b) Number included in (3) (a) in respect of whom the first Form 1 was previously reported under (1)		11
(c) Number included in (3) (a) transferred from other areas		Nil.

These 28 women alone account for 61 of 1(a) 15 of 1944 and 2 of 1943.

- (4) Number of those in (3) (a) who were :—
- (a) found 26 (Including those already attending)
- (b) examined after persuasion or already under treatment 8 (Including 1 on whom Form 2 was served last year but more Form 1's were received this year).

- (c) Served with Form 2 18
- (d) Examined after service
of Form 2 .. 17
- (e) prosecuted for failure :—
 (i) to attend for, and submit
to medical examination 1
 (ii) to submit to and
continue treatment 4
- (f) transferred to other
areas 2

**Lectures on Venereal Diseases given by the Medical Director and
Lecturers of the Central Council for Health Education.**

<i>Date.</i>	<i>Lecturer.</i>	<i>Audience.</i>	<i>Number present.</i>
17/1/45	Dr. R. Marinkovitch	Boots Pure Drug Co. Nursing & Clerical Staff.	40 V.D.
15/3/45	do.	Aspley Co-operators	35
4/4/45	do.	Nottingham City Transport Workers ..	120 V.D.
3/5/45	do.	City Isolation Hospital, Nottm.	40 V.D.
7/5/45	do.	University College ..	
8/5/45	do.	do. ..	300
19/10/45	do.	Meeting to Factory Managers, etc. in connection with Nottm. City V.D. Campaign ..	30 V.D.
23/11/45	do.	Meeting to Matrons, Health Visitors, etc., at Gas Theatre, Nottm.	40 V.D.

<i>Date.</i>	<i>Lecturer.</i>	<i>Audience.</i>	<i>Number present.</i>
6/2/45	Dr. I. Powell-Heath	Y.W.C.A. Mother-craft lecture at Education Dept., South Parade, Nottingham	.. 100
12/2/45	do.	Nat. Assoc. of Girls'	
19/2/45	do.	Clubs, Education	
26/2/45	do.	Dept., South Parade, Nottm.	25 G.H.
22/2/45	do.	Nottingham Chapter and Christian Council.	
		Holy Trinity Hall.	80 S.E.
1/3/45	do.	N.F.S. Members at	
14/3/45	do.	Cyprus Lodge,	
21/3/45	do.	Magdala Road,	
26/3/45	do.	Nottm. Household Management Course	25
4/11/45	do.	W.J.A.C. Notts.	
18/11/45	do.	1047 Unit. Trent Bridge School ..	35 S.E.
12/11/45	do.	Y.W.C.A. Sneinton	
19/11/45	do.	Club, Nottm. ..	40
26/11/45	do.		
4/12/45	Dr. Charles Hill.	Public Meeting at	
	"The Radio Doctor"	Albert Hall, Nottm.	3,000 V.D.

In addition many film shows were provided in factories during lunch-hour etc., by the Central Council.

S.E.—Sex education.

G.H.—General Hygiene.

CANCER.

Negotiations for the scheme under the Cancer Act have proceeded slowly. In the last Annual Report mention was made of conferences held in Sheffield with a view to the formation of an organisation based on Sheffield as centre and covering a large area of the East Midlands and South Yorkshire.

These negotiations have taken so long that it is now not thought worth while to go on with the formation of a statutory joint committee for the whole area, in view of the probability that by the time the legal work can be completed the new Health Services arrangements will be in force, and the responsibility for all cancer treatment will rest with the Ministry of Health.

It must not be thought, however, that no good purpose has been achieved by these conferences ; on the contrary the discussions and investigations have thrown much light on the needs of the large area and the way in which these needs can be met, whatever authority may be responsible for meeting them

Locally the co-operation between the City and County on one side, and the Joint Committee of the Cancer Campaign and the General Hospital on the other side, has continued cordially and successfully.

The provision of facilities for diagnosis and treatment by the Joint Committee referred to has proceeded apace, with great benefit to the inhabitants of city and county. Under Dr. Glyn Evans as director of the clinic at the General Hospital, the cancer work there has been developed to a high degree of efficiency, and is provided with up-to-date X-ray apparatus, while radium is applied under skilled control.

Those who have contributed to and worked for the Nottinghamshire Council of the British Empire Cancer Campaign can justly be proud of the outcome of their efforts. This must especially be the case with Mr. R. G. Hogarth, F.R.C.S., who for so many years inspired the work as Chairman of the Council.

As this Report is being written Mr. Hogarth is retiring from the chairmanship, and it is fitting that reference should be made to his pioneer efforts and sustained interest and accomplishments in the war against cancer. He should be accorded the thanks he deserves.

ULTRA-VIOLET RAY CLINIC.

The increased activity of this clinic has continued, and in order to cope with it a new room has been furnished with additional electrical equipment.

The number of treatments administered was 9,506 to 625 persons, compared with the previous year's total of 8,740 treatments to 467 patients, which in itself was an increase over earlier years. Infants benefit to a satisfactory degree and all children referred from the Infant Welfare Centres are treated free of cost. They numbered 315. Paying patients numbered 240, and of these 208 were from the city and 32 from the county. Free patients including infants, totalled 385

This service continues to serve a useful purpose.

The death of Dr. Clayton Rigby severed a very long connection ; Dr. Jaffé who also has served for many years, continues in office assisted by Dr. Sophie Stuart,

CITY BACTERIOLOGICAL LABORATORY.

Dr. E. J. Storer gives the following summary of the work of his laboratory :—

During the year 29,126 specimens have been examined by the staff of the City Laboratory, as compared with 23,024 in 1944.

For the purpose of comparison the figures of the past three years are set out :—

Examinations in connection with Venereal Disease :—

1943.	1944.	1945.
13,482	12,386	16,953

„ under Public Health Acts :—

1943.	1944.	1945.
11,991	10,452	11,892

<i>Clinical Pathological Work</i>	656	186	281
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Examinations in connection with Venereal Diseases.

During the past year 16,953 examinations have been carried out at the City Laboratory.

The specimens have been derived from the following sources :—

(a) City V.D. clinic (all cases)	..	..	8,603
(Army 333. Navy 80. R.A.F. 280).			
(b) City hospital and institutions	..	..	5,156
(c) City medical practioners	..	..	769
(d) County V.D. clinic	..	..	1,651
(e) County hospitals and institutions		..	508
(f) County Medical practitioners	..	..	267

Examinations in accordance with various Public Health Acts.

These numbered 11,892 as compared with 10,452 in 1944 and 11,991 in 1943.

The number of swabs examined for diphtheria was 5,532 of which 421 were positive.

Examination of sputa for tubercle bacilli numbered 4,452 of which 965 were positive.

Public Health Work was derived from the following sources :—

(a)	City institutions	..	..	..	5,867
(b)	,, hospitals	..	..	..	603
(c)	,, medical practitioners	..	..	..	1,756
(d)	County health department	..	..	..	1,027
(e)	,, hospitals	..	..	..	688
(f)	,, medical practitioners	..	..	..	1,951

Clinical Pathological Work.

During the past year 281 specimens were examined.

CERTIFICATION FOR CREMATION.

Before cremation can take place at Wilford Hill, the necessary documents and medical certificates must be studied by a medical referee, and a certificate issued by him. The medical referee is the Medical Officer of Health and Dr. J. V. Whitaker acts as deputy. During 1945 they acted in 833 cases, an increase over the figure for 1944, which was 694.

It is satisfactory that the public is gradually getting more favourably inclined towards this method for the disposal of the dead, which saves valuable ground space and which is associated with far greater convenience to the mourners at the disposal ceremony, which takes place entirely under cover from the weather. The bodies cremated were from a large area around as well as from the City, so they still represent only a moderate proportion of the deaths.

PUBLIC MORTUARIES.

The public mortuaries are under the control of the Health Committee. The Leenside Mortuary, being equipped with electrically-refrigerated storage accommodation for bodies is the one used, to the exclusion of the smaller ones at Hyson Green and Bulwell in normal periods.

In 1945 Leenside was used for 255 bodies. Much work was done for the staff in connection with the City Coroners' department. The number of post-mortem examinations at Leenside was 221.

CARE OF THE BLIND.

Prevention of Blindness.

The work of the Blind Persons' Sub-Committee of the Health Committee has continued to be largely concerned with the amounts of the various allowances made to supplement the earnings of blind workers and unemployable blind.

The Royal Midland Institution for the Blind continues to carry out on behalf of the Corporation, and of other Local Authorities, the training of the blind, the employment of blind persons in its workshops, and the supervision by home teachers of the welfare of the blind in their own homes. Under the Secretary and Superintendent, Mr. A. C. V. Thomas, this work is performed to the great satisfaction of the Corporation, and the Chairman and Vice-Chairman of the Health Committee are members of the Institution's Committee.

Blind workers did their share during the war to a notable degree, not only in the institution's workshops,

but in some cases in factories ; it is really wonderful how skilful many blind persons can become in performing quite intricate tasks at the bench.

The blind persons on the city register at 31/12/45 are 535, classified as follows :—

Blind Trainees (maintained by Education Committee)..	6
Blind Workshop Employees, including blind persons on the staff of the Institution	64
Home Workers	6
Unemployable Blind receiving assistance	309
Blind Persons not in receipt of any form of financial help from the City Council	148
Blind Home Teachers	2
	<hr/>
	535
	<hr/>

The total is exactly the same as a year ago.

The cost of these services for the year ended 31/3/46 stands at £27,923, subject to certain adjustments.

The Health Committee also has a scheme for the prevention of blindness. This work has consisted largely of paying for operations, chiefly for cataract, with the hope of restoring failing sight. Payments are made to the surgeons of the Eye Infirmary for operations on approved cases, and the maintenance costs of the Eye Infirmary in respect of these cases are borne by the Corporation, subject to repayment of part cost by the patients, if their means allow. The almoners' department looks after this piece of work.

The number recommended for the scheme has from its inception been spasmodic. Only 9 new cases were accepted during the year. One of these was a child with

congenital cataract needing operative treatment, subsequently transferred to the provisions of the Education Authority. The remainder were elderly people, two with other disabilities which made them unable to agree to operation. One man previously registered as blind has since treatment been de-certified. In two cases blindness has been averted by the treatment received ; one who is particularly grateful is an elderly woman living alone and looking after herself entirely.

Treatment often extends over a considerable period, perhaps several years. Results, therefore, cannot be summarised quickly and several cases from previous years were still having treatment during 1945. Actual payments during the year on all current cases amounted to £359. 19s. 4d., of which £176. 3s. 4d. was paid to ophthalmic surgeons and £183. 16s. 0d. to the Eye Infirmary.

ACKNOWLEDGMENTS.

Every year in my Report I acknowledge the hard work and enthusiasm of the staff on the one hand and, on the other hand, the support and encouragement received from the Health Committee. I should not like this to become a lifeless formality ; my appreciation of the efforts and goodwill of a large and efficient staff in the offices, the clinics, the hospitals, and in the field of home midwifery becomes increasingly deep. It is a privilege to be working as a member of such a good team. Moreover, health work is not confined to the Health Department ; it is team work in which the departments of the Town Clerk, the City Treasurer, the City Engineer, the Estates Surveyor, and other Corporation departments, are heavily involved, and it is proper to record this pleasant co-operation.

Unless the Health Committee adopted a forward policy and maintained a determination to do its utmost for the citizens there would be among keen workers in the departments a sense of frustration and disappointment. How good it is, therefore, to be able to acknowledge with sincerity the existence in the Health Committee of just the right spirit !

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August, 1946.

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